HITS 2002:

HIV Testing Survey Among Migrant and Seasonal Farm Workers

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Glossary of Acronyms

AIDS – Acquired Immunodeficiency Syndrome

HIV – Human Immunodeficiency Virus

HITS – HIV Testing Survey

MSFW - Migrant Seasonal Farm Workers

NAWS – National Agricultural Workers Survey

OMH – Office of Migrant Health

OA – Office of AIDS

STDs – Sexually transmitted diseases

CDC – Centers for Disease Control and Prevention

CI – Confidence interval

CDHS – California Department of Health Services

U.S. – United States

CMC - Community Medical Centers, Inc.



Objectives: The 2002 HIV Testing Survey (HITS) was undertaken to:

- Monitor human immunodeficiency virus (HIV) testing patterns;
- Assess reasons, barriers, and factors that influence decisions toward seeking or delaying HIV testing;
- Assess the knowledge of state policies for HIV surveillance; and
- Conduct behavioral surveillance among the migrant and seasonal farm worker (MSFW) population.

Design: The California Department of Health Services, Office of AIDS (CDHS/OA), in collaboration with the Centers for Disease Control and Prevention (CDC), conducted an anonymous cross-sectional survey of MSFW in the California counties of San Joaquin, Solano, and Yolo. A convenience sample of 400 eligible participants was conducted with face-to-face interviews occurring between September and December 2002. Respondents answered approximately 100 questions in a Spanish interview that lasted on average 45 minutes. Information collected on the questionnaire included: demographics; HIV testing experiences; perceptions for HIV infection; knowledge of HIV testing policies; and sexual and drug use behaviors.

Results: The response rate for the survey was 76 percent. All respondents identified themselves as Latino; 99 percent of Mexican heritage. Sixty-five percent of respondents were between 18 and 35 years of age, 65 percent were male and 35 percent were female. Fifty-nine percent of participants had no formal education or had only primary schooling. Thirty-one percent of participants reported having tested for HIV at least

once. Having taken an HIV test was found to be positively associated with female gender (Confidence interval [CI]: 1.7, 4.3), high school or college education (CI: 1.2, 2.9), having insurance (CI: 1.6, 4.2), and being married or having a steady partner (CI: 1.2, 3.3). Primary reasons for seeking an HIV test cited by MSFW included: to learn their serostatus (61 percent), recommended by a doctor or someone else (38) percent), and the desire to get pregnant (30 percent). Seventy-six percent of respondents perceived their risk of contracting HIV as "not at risk" or "low risk." The MSFW in this study had very little awareness of either HIV testing or reporting policies in California. In regards to sexual behavior, there was no reported homosexual activity by any of the respondents. Sixteen percent of males (42/261) reported exchanging money or drugs for sex in the past 12 months; and of these males, 12 percent reported never using a condom. In response to drug use behavior, 30 percent of all respondents reported ever having used needles to inject drugs, vitamins, or antibiotics. Among those who ever used drugs, 64 percent reported marijuana use and 46 percent reported cocaine use in the past month. Among female MSFW, 91 percent received prenatal care in California during their last pregnancy, while only 55 percent of these women reported getting an HIV test during their most recent pregnancy.

Conclusion: HITS presents HIV testing patterns, reasons for and barriers to HIV testing, prevalence of risk behaviors, and knowledge of HIV reporting policies among the MSFW. The data gathered from this survey may assist public health officials, local prevention programs, and policy makers to effectively identify specific needs of MSFW, and design more focused and culturally appropriate interventions to help meet these needs.



The federal Office of Migrant Health (OMH) defines farm workers as persons who identify agriculture as their primary employment. OMH further classifies farm workers as either migrant or seasonal, based on their housing situation. Population estimates vary widely. California's migrant farm worker population is estimated between 600,000 and 1.1 million, 28 percent of whom are women. OMH estimates approximately three million, and the United States (U.S.) Department of Health and Human Services estimates approximately four million.

The farm worker population can be further distinguished between those who are employed on a seasonal basis, and those who migrate to find employment. 'Migrant' farm workers are those who temporarily cross state or county boundaries and stay overnight to do hired farm work, or those who have no permanent place of residence and work in two or more counties during the year. 'Seasonal' farm workers are those who identify agriculture as their primary employment and reside permanently in a given location. About half of the farm workers in California are migrants, although patterns of migration vary throughout the state. Generally, about one-third of farm workers are seasonal farm workers and tend to settle in one region. The remaining two-thirds are migrant farm workers and are otherwise referred to as shuttle or back-and-forth-migrants, newcomers in their first year, or follow-the-crop migrants.2

Migrant farm workers in the U.S. currently represent a wide variety of cultural, linguistic, and ethnic backgrounds. Most are Latino, with the remainder comprised of African Americans, Asian/Pacific Islanders, Caribbean Islanders, and Whites. There are three major agricultural

"streams" of migrant farm workers in the U.S. with the West Coast stream (the western portion of the country where agricultural workers migrate during farm seasons) primarily comprised of Mexicans and Mexican Americans. Most are male, but there has been an increase in the last two decades in the proportion of females.² The National Agricultural Workers Survey (NAWS), conducted in 1995 to 1997, showed that nearly all California farm workers are foreign born, mostly from Mexico. The study also revealed that four out of five were men, with an average age of 33 years. Three out of five participants in the study were married, and more than half were parents. A 1997 study of migrant farm workers in Northern California found that about half of the sample was married, with about 30 percent living away from their spouse. The NAWS study also showed that 40 percent of the workers interviewed were not legally eligible for employment in the U.S.²

The socioeconomic status of migrant farm workers is generally lower than national/state averages of education and annual income. The NAWS study showed migrant farm workers typically have six years of education, and fewer than ten percent of foreign-born workers speak or read English fluently. Nearly all California migrant farm workers communicate in Spanish. In 1995 to 1997, the average hourly wage of California migrant farm workers was \$5.69. Three out of four migrant farm workers earned less than \$10,000 per year, and three out of five lived below the poverty level. While more than half were covered by unemployment insurance, only one in five were aware of workers compensation insurance, and very few had health insurance.²

Two studies found that the incidence of acquired immunodeficiency syndrome (AIDS) in rural areas is increasing rapidly, and that the

second wave of the epidemic can be seen primarily among high-risk populations, including seasonal and migrant farm workers.³ High levels of poverty particularly characterize these populations, increasing the severity of the impact of the epidemic.

In recent years, Latinos have been particularly hard hit by the AIDS epidemic. In 1995, HIV infection was the leading cause of death among Latinos aged 25 to 44. Among foreign-born Latinos, the largest annual increase of AIDS cases is among heterosexual men and women. Furthermore, evidence suggests that foreign-born cases were infected in the U.S.⁴

HIV/AIDS prevalence is very difficult to estimate for the MSFW population. The data that exist indicate that migrant farm workers are contracting HIV at ten times the rate of the general population.³ However, a 1997 study of Northern California farm workers found no cases of HIV infection, but a high prevalence of risk behaviors. A 1992 study of Florida farm workers found a five percent prevalence of HIV, and eight percent of the sample had reactive serologic tests for syphilis.³ Further complicating prevalence estimates is the tendency for workers who are sick (including those with HIV/AIDS) to return to Mexico for care, despite the lack of HIV treatment services. Often, undocumented workers in the U.S. are reluctant to take part in medical studies and use health facilities for fear of detection and deportation.4

Although HIV prevalence among migrant farm workers is low, their knowledge and behaviors still put them at risk for HIV. Surveys of the farm worker population indicate mixed knowledge of HIV transmission. Respondents are generally knowledgeable about major modes of HIV transmission but hold many

misconceptions regarding transmission, (i.e., public bathrooms, taking an AIDS test, kissing, going to work or school with infected individuals, and clothing). A 1997 study found that three out of four respondents knew about AIDS. Most did not have accurate information on HIV transmission, and only 10 of 173 knew someone with AIDS.

Several studies have examined condom use in the farm worker population, and have generally found that knowledge of condom use among MSFW is poor, and condoms are underutilized. A 1997 study of Northern California workers found that a majority of the sample had never used a condom. Results from a study of Mexican migrants in California showed that few had negative beliefs about condom use but that social norms sanctioning condom use were limited.6 In another study one-third (35 percent) believed condoms are for prostitutes, and 54 percent believed condoms are for gay men. Barriers to condom use include feeling embarrassed about getting condoms, perceived loss of physical sensation, and that use of condoms will identify them as homosexual.⁶ While some men in a qualitative survey of farm workers in a small Florida agricultural community understood the need to consistently use condoms to prevent sexually transmitted diseases (STDs), other men made decisions about condom use based on the outward appearance of women they had sex with and the type of relationship they had with the prospective partner.6

Another factor in the potential spread of HIV and STDs is the frequent use of prostitutes by male farm workers. A 1997 study showed that 39 percent of male respondents had paid for sex, ⁷ and another study showed that 43 percent of 342 men surveyed in a series of interviews in Jalisco, Mexico (one of the primary locations

from which workers in California migrate) used prostitutes while in the United States.⁸ This study also indicated that married men were as likely to use prostitutes, and were less likely to use condoms than were single men. These behaviors pose significant health risks for their wives. Another possible mode of transmission is a practice in which several men have intercourse with a single female prostitute in succession. Adding to the risk is the fact that often the women are injection drug users.⁹

While injection of illicit drugs is a relatively rare practice among farm workers, a more common occurrence is sharing needles to inject vitamins and antibiotics, thus encountering a significant danger of HIV transmission. Some of the

reasons for self-injection of vitamins and antibiotics include cultural beliefs that injecting medicine is more effective than oral administration, the perceived irrelevance of professional health care workers' prescriptions of therapies, and access barriers to health care. 10 A small study of HIV-positive Mexican immigrants in California revealed that nearly half of the respondents reported having shared needles or used unclean needles to inject vitamins and antibiotics. Furthermore. needle sharing was not seen as a negative or dangerous behavior. This, combined with other risk factors, creates "a serious web of causation" and "increases the risk of spreading AIDS in the migrant farm worker population." 10 Methods

Questionnaire Development

Most of the questions in the survey instrument were adapted from the HITS questionnaire developed by CDC in 2001; modification of questions was kept to a minimum to maintain consistency with other national sites participating in HITS. Some socio-demographic questions such as income, living arrangement, language spoken, country of birth, occupation, and income were either added or modified from the 2001 HITS questionnaire to account for a priori information regarding the target population. Items related to injection of parenteral antibiotic and vitamin use were added based on previous studies that report injection of these substances.

For the purposes of this survey, HITS 2002 made the distinction between a 'migrant' farm worker and a 'seasonal' farm worker, although as a whole, all participants were in general identified as a population of migrant farm workers. Questions in the survey instrument included asking respondents to specify whether their work involved remaining in one camp or location or whether they moved from one location to another, to follow the crops. Responses to these questions allowed the type of farm worker to be further classified as either a 'seasonal' or a 'migrant' farm worker.

Knowledge of prenatal care and, in particular, ways to prevent HIV transmission to unborn children has not been adequately studied in this population. A review of the literature showed that prenatal outcome data for migrant farm working women had never been analyzed in the peer-reviewed literature. Given the national effort to eliminate prenatal HIV transmission, questions on knowledge of

prenatal HIV exposure and offering of voluntary HIV counseling and testing among women were included in the survey.

The new or modified questions were translated in Spanish and the questionnaire was pilot tested to minimize ambiguity.

Formative Research

Prior to implementing the survey, formative research was conducted to identify ways to access the farm worker population and to select specific recruitment and interview sites. Several strategies were utilized to learn more information about migrant and seasonal farm workers. An exhaustive literature review was conducted initially to gain more knowledge of HIV health studies conducted in this population and to gain a better understanding of the socio-demographic characteristics of the population of interest. State census data were reviewed to identify housing and employment characteristics in the geographic areas of interest. Local reports published by the counties were also reviewed to get more specific information on demographic characteristics and health care access of the migrant population for the counties where the study would be conducted, and identify initiatives and implementation plans targeting farm workers.

To get more accurate and detailed information about the farm worker population and the potential sites to conduct the study, four separate meetings were organized with farm workers and community members who interact with this population. These community meetings were conducted to introduce the study to the population of interest, health facilitators, outreach workers, early intervention

program coordinators, and program directors from support services, migrant and health education groups, and health care clinics. As key informants, meeting participants were provided a list of key questions that would be discussed during the meeting. A facilitator guided each meeting to identify: migrant camps and demographic characteristics and estimated population size of each camp; alternative recruitment sites; community-based agencies and organizations that work with or interact closely with the target populations; and to provide suggestions for recruiting participants to the study.

Through the meetings, several government subsidized migrant camps and several private housing establishments that cater to migrant farm workers were identified. Government programs which migrants utilize, such as the Migrant Education Program; Women, Infants, and Children Program; and Healthy Start Program were identified, as well as local organizations that serve and conduct outreach to the migrant community, such as the church, Community Medical Centers, Inc. (CMC), and Dixon Family Practice Clinic. Locations such as bars, restaurants, laundromats, markets, and parks where migrant farm workers tend to frequent were enumerated.

To more effectively recruit participants to the study, some key suggestions included advertising recruitment through local radio stations and newspapers popular with farm workers; distributing recruitment flyers at health fairs and venues frequented by farm workers; matching same gender interviewee and participant; providing monetary incentives; and, downplaying government involvement in the study.

Participating Counties

CDHS/OA, in collaboration with CDC, selected San Joaquin, Solano, and Yolo Counties as the participating regions for conducting HITS 2002. These counties were selected based on information they provided about their ability to access a large sample of MSFW.

Recruitment and interviews were conducted within a total of 22 selected rural and urban sites, 18 in San Joaquin County, and four sites in Yolo and Solano Counties, combined. Of these sites, three were comprised of men-only camps.

Recruitment Method

Early in the farming season, a flyer was posted and distributed to promote the survey in Yolo and Solano Counties. The flyer was not used in San Joaquin County. A screener questionnaire was used to determine study participant eligibility. Eligibility criteria required that the participant be at least 18 years of age and respond affirmatively when asked if he or she worked on either a farm or field site. or in a cannery. The assessment of eligibility was made upon the interviewer delivering the screening script verbatim. The recruiter/interviewer would introduce the purpose of the survey and ask the potential participant if he/she was willing to participate. A \$25 cash incentive was given upon completion. Screening and identifying eligibility of the potential candidates was primarily conducted, and in most cases, the interview would follow immediately afterwards. In a few cases, the interviewer arranged a more convenient time to return to administer the survey.

All interviews were conducted in safe and private settings in order to ensure confidentiality and security for both the interviewer and participant. In all instances but one, the interviews were conducted in Spanish.

Sampling Method

A convenience sampling method was applied to this study population. Within the larger migrant family camps, a systematic selection of housing units was applied whereby every other house or unit was approached door-to-door. The interviewer indicated on a schematic map of the camp's housing units where recruitment and interviews were conducted. Among each unit approached, eligibility screening was directed towards the first adult encountered. In situations where no adult was present within the housing unit, the adjacent housing unit was approached. In the smaller, rural, or men-only campsites, migrant farm workers regularly gather outside their living guarters or in designated dining areas. In this situation, the interviewer randomly approached the worker to recruit, assess eligibility, and perform the interview. Throughout the recruitment and interview process, primary focus was given to targeting the men-only camps since males in this particular study population were known to engage in higher risk behaviors for HIV infection than men recruited from the family migrant camps. The same convenience sampling method was applied within the non-traditional venues (i.e., health fairs, local health clinics, hang out areas).

Interviewers

Bilingual outreach workers and staff hired by CMC generally conducted recruitment and interviews among selected sites during evening hours and on weekends.

Data Management and Analysis

Interviewers were assigned specific blocks of alphanumeric identification codes that were used for identifying each survey instrument. These five-digit codes corresponded to the county in which the survey was conducted and the number assigned to each staff. Thus, all records with an identification code that start with SJ were interviews conducted in San Joaquin County, YO for those interviews conducted in Yolo County, and SO for interviews conducted in Solano County. This coding system allowed the principal investigators and coordinators to track data collection efforts and follow up with specific interviewer staff when there were discrepancies in data collected.

Interviewers were responsible for keeping track of surveys through the use of an "Interviewer Log" form. The form contained the interviewer's initials, date of survey, site, time at site, and a short description of what was occurring at the site during the interview period. Also collected on this form were the identification codes for each survey administered that day. Completed surveys were returned to the local county coordinator on the following day. A list of sites and addresses was kept and regularly updated to keep track of the number of encounters made at each site. Interviewer logs were submitted with each completed group of surveys and matched with the staff's identification code on each survey instrument. Surveys were also checked for completeness upon submission.

Tally sheets were used to monitor progress. Each tally sheet contained information on the total number of individuals reached during a survey period (typically over the course of one to two days) and the staff identification code.

Information included numbers of individuals who: declined; were not eligible; were eligible, but declined; partially completed the interview; completed the interview; and total encounters.

A key entry database was developed for the study using Microsoft Access 2000. To minimize key entry errors, the Access database was created to assure proper skip patterns during data entry with delimited choices for multiple-choice selections to what is available in drop down menus on the data screen. During regular site visits, the principal investigators ran gueries on the database to assess distribution of data for select variables and identify outliers. These outliers were compared with the original response to the questionnaire and further verified with the interviewer who completed the questionnaire. County coordinators met regularly with the interviewer staff to identify issues that arose during the interviews and were reported to the principal investigators.

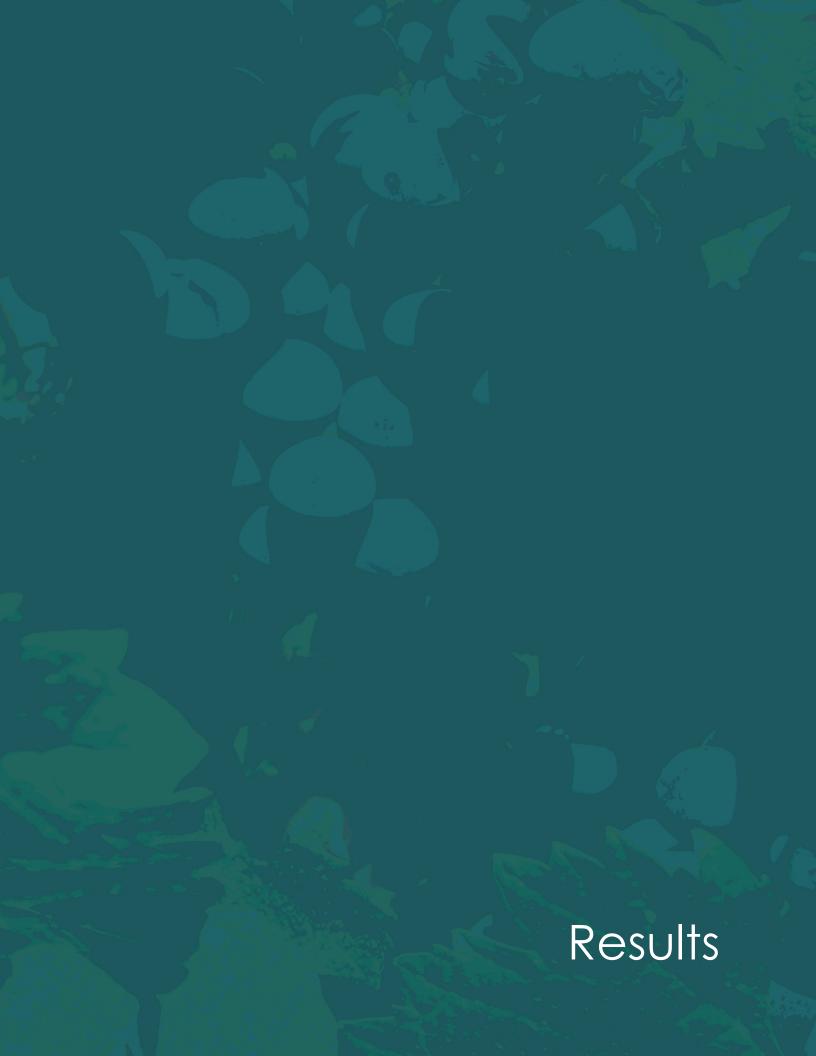
Each of the sites was provided a stand-alone laptop computer with a Microsoft Access database to key in the survey data. The laptop and all completed questionnaires were stored in securely locked file cabinets at the Dixon Family Practice Clinic and at the San Joaquin

CMC clinic. Data entry was completed in a private office. After completion of the interviews, the laptop computers containing the database and the completed questionnaires were turned over to the principal investigators for safekeeping. The laptop computers and the questionnaires were kept in locked cabinets in a restricted access room.

All data from the two laptop computers were merged into one database using SPSS 10.0. During data analysis, eligibility of the participant was again determined and all records that were deemed ineligible were not included in the analysis. Univariate statistics and frequency tabulations were created to identify missing values and outlier responses. These were again compared with the responses in the original questionnaire to ensure that key entry errors were kept at a minimum.

Field reports indicated possible skip pattern errors by interviewers during the course of the first few interviews conducted. Cross validation of data of select variables was conducted to identify skip pattern errors during the interview process. Filtering programs were developed to eliminate these errors in data analysis.





Demographics

Among 528 individuals who were deemed eligible to participate, 400 completed the interviews, thus generating an over-all response rate of 76 percent. Sixty-five percent (261/400) of all those interviewed were male. Seventy-two percent (286/400) said they were either married or in a live-in arrangement. Among those married, 25 percent (65/261) did not have their spouse with them. Thirty-four percent were between 18-25 years of age, 48 percent between 26-45 years, and 18 percent were 46 years of age and over (Table 1).

Most participants had received only primary schooling or no formal schooling (60 percent).

All participants identified themselves to be Latino, with 99 percent (394/400) of Mexican heritage. Ninety-two percent were born in Mexico and seven percent were U.S.-born. Ninety-nine percent speak Spanish at home.

Forty-nine percent of respondents rented either an apartment or a house, while 46 percent said they lived in a migrant camp. Sixty-eight percent lived with family members, while 30 percent said they shared their housing unit with other families or migrant farm workers. At the time of interview, 83 percent were employed. Sixty-two percent (248/400) earned \$1,000 or less monthly. Fifty-four percent said that they can either pay for their living expenses, but not save, or cannot pay for their living expenses.

Table 1. Demographic Characteristics of Migrant and Seasonal Farm Workers Surveyed

CHARACTERISTIC		n=400	%	CHARACTERISTIC		n=400	%
Gender	Male	261	65	Place of Birth	United States	29	7
	Female	139	35		Mexico	367	92
Marital Status	Married/Live-In	286	72]	Central America	4	1
	Single/Divorced/Separated	112	28	Residence Type	Migrant Camp	184	46
	Missing	2			Non-Migrant Housing	214	54
Age Category	18 - 21	83	21]	Missing	2	
	22 - 25	53	13	Monthly Income	< \$500	40	10
	26 - 35	123	31		\$500 - \$1,000	208	53
	36 - 45	69	17		\$1,000 - \$1,500	94	24
	46 - 55	44	11	1	\$1,500 - \$2,000	29	7
	56 or Older	27	7]	> \$2,000	24	6
	Missing	1			Missing	5	
Educational	None or Primary Schooling	236	60	Financial	Can Pay Living Expenses and Save	181	46
Level	Some High School or College	160	40	Situation	Can Pay Living Expenses but NOT Save	198	50
	Missing	4			CANNOT Pay for Living Expenses	16	4
Language at	Spanish	392	99]	Missing	5	
Home	English	1	0	Insurance	No Insurance	292	74
	Other (Mixteco, Indian)	5	1	Status	Has Insurance	102	26
	Missing	2		1	Missing	6	

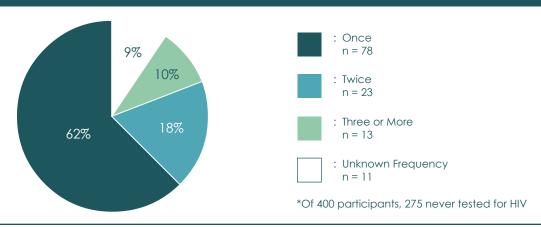
Only 26 percent (102/400) claimed they had some form of health insurance.

HIV Testing Experience

Thirty-one percent (125/400) of all participants had an HIV test. Among those who had taken an HIV test, 62 percent (78/125) had tested once, 18 percent had tested twice (23/125), and 10 percent had tested three or more times (Figure 1). Fourteen percent claimed they get tested for HIV regularly.

Having taken an HIV test was associated with female gender, higher educational level, being married or having a steady partner, and being insured (Table 2). Females were 2.7 times more likely to have tested for HIV as compared to males; those with more education were 1.8 times more likely to have tested compared to those who had little formal schooling or no education; those who were married or had a live-in partner were 2.0 times more likely to have tested; and, those who have health insurance were 2.6 times more likely to have tested compared to those with no insurance.

Figure 1. Distribution of HIV Testing Frequency Among Seasonal and Migrant Farm Workers



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Table 2. Factors Associated with Taking an HIV Test Among Migrant and Seasonal Farm Workers

FACTORS		Significance	Odds Ratio	95% CI
Gender	Female	P < .01	2.7	(1.7 - 4.3)
	Male		1.0	
Education	High School/College	P < .01	1.8	(1.2 - 2.9)
	None/Primary		1.0	
Having a Partner	Married/Live-In	P < .05	2.0	(1.2 - 3.3)
	Single/Divorced/Separated		1.0	
Insurance Status	Insured	P < .01	2.6	(1.6 - 4.2)
	Uninsured		1.0	

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Ninety-five percent (111/125) of those who had taken an HIV test received their HIV results every time they tested. Of the six who had not returned for their test results every time they tested, four thought that they would be contacted by a testing staff if they tested HIV positive. None of the participants who had tested for HIV reported getting a positive result.

Participants selected reasons enumerated by the interviewer as to why they tested for HIV. Main reasons provided by men for their last HIV test were wanting to know their serostatus (30 percent); being tested as part of a routine STD/medical check-up (16 percent); and having the test recommended by a doctor or by someone else (both 11 percent; 6/56). The main reasons women sought their last HIV test were wanting a pregnancy (31 percent); wanting to know their serostatus (20 percent); or having a doctor recommend the test (19 percent) (Table 3).

Table 3. Primary Reason Cited by Seasonal and Migrant Farm Workers for Taking an HIV Test by Gender

REASON	Мо	ıle	Fen	nale
REASON	n = 56	%	n = 59	%
Wanted to Know Serostatus	17	30	12	20
Wanted Pregnancy	3	5	18	31
Doctor Suggested	6	11	11	19
Routine STD/Medical Check-Up	9	16	4	7
Someone Suggested	6	11	5	9
Exposed Via Sex	5	9	0	0
Might Pass on HIV	2	4	2	3
Other Reason	1	2	2	3
Required	1	2	1	2
Partner was HIV Positive	2	4	0	0
Unknown	4	7	4	7

Note: Percents do not add up to 100 due to rounding.

Bivariate analysis revealed that having taken an HIV test based on recommendations by a medical provider was associated with gender and insurance status. Females and those who had health insurance coverage had higher odds of having taken an HIV test based on a medical provider's recommendation. Taking an HIV test because they or their partner wanted a child or a pregnancy was associated with gender, being married or having a steady partner, educational status, type of residential housing, and insurance status. Females, those who are married or have a steady partner, those who reside at migrant housing, those

with a higher level of education, and those who have health insurance had higher odds of taking an HIV test because they or their partner wanted a child or was pregnant (Table 4).

When participants were asked to identify the main reason among all the options they chose an HIV test, the top three reasons cited continued to be: (a) because they wanted to know their serostatus (24 percent); (b) because they or their partner wanted to have a child or were pregnant (17 percent); and (c) because their doctor suggested that they take the test (14 percent).

Table 4. Factors Associated with Reasons for Taking an HIV Test Among Seasonal and Migrant Farm Workers

FACTORS		Significance	Odds Ratio	95% CI
A. Tested Beca	use a Medical Provider Suggested			
Gender	Female	P < .05	2.3	(1.1 - 5.0)
	Male		1.0	
Insurance	Insured	P < .01	4.6	(2.0 - 10.3)
Status	Uninsured			
B. Tested Becau	use They or Their Partner Wanted to	Have a Child o	r Pregnanc	у
Gender	Female	P < .05	8.0	(3.0 - 21.3)
	Male		1.0	
Insurance	Insured	P < .01	3.5	(1.5 - 8.0)
Status	Uninsured			
Having a	Married/Live-In	P < .05	5.3	(1.2 - 24.4)
Partner	Single/Divorced/Separated		1.0	
Education	High School/College	P < .05	2.3	(1.0 - 5.4)
	None/Primary		1.0	
Housing Type	Migrant Camp	P < .05	3.0	(1.3 - 7.1)
	Non-Migrant Camp		1.0	

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Forty-five interviewees had taken an HIV test within 12 months of the interview date. Of these, only three claimed they tested for HIV without delay—delay meaning once the participant made the decision to get an HIV test, he/she was tested right away, without hesitation for any particular reason. Those who delayed getting an HIV test (n=42) were asked why they delayed testing. A list of reasons why some people delay testing was read to the 42

participants. Participants agreed with one or several of the reasons read to them. The most common responses were perceiving themselves as HIV negative, and believing they were not exposed to HIV (Table 5). When asked to name the primary reason they delayed HIV testing, 31 percent thought they were unlikely to be exposed to HIV, 21 percent thought they were HIV negative, and 12 percent did not know where to get an HIV test.

Table 5. Primary Reason for Having Delayed HIV Testing Among Migrant and Seasonal Farm Workers Who Had an HIV Test Within 12 Months Prior to Participating in the Survey

REASON	n	%
Thought They Were Unlikely to be Exposed to HIV	13	31
Thought They Were HIV Negative	9	21
Did Not Know Where to Get Tested	5	12
Did Not Have Time to Test	2	5
Worried About Name Reporting to the Government	2	5
Did Not Want to Think of Being HIV Positive	1	2
Worried About Who Finds Out	1	2
Other	1	2
Unknown	8	19
TOTAL	42	100

Note: Percents do not add up to 100 due to rounding.

Farm workers who had never taken an HIV test, or whose most recent HIV test was more than a year prior to the interview, were asked why they did not get an HIV test. Reasons why some people do not test for HIV were read to the interviewees. When asked to identify the primary reason why they have not taken an HIV test, 34 percent thought they were unlikely exposed to HIV, 27 percent thought they were HIV negative, and 10 percent said they did not know where to get an HIV test (Table 6).

Of those who have tested, only 40 percent recalled that someone at the testing place worked with them on a plan to help protect themselves from HIV or STD. None of those who had taken an HIV test reported receiving a positive test result. Only 31 percent (36/115) took an anonymous HIV test.

The most commonly reported venues where participants were tested for HIV included public health clinics or through AIDS outreach efforts

Table 6. Primary Reason Not Taking an HIV Test Among Migrant and Seasonal Farm Workers Who Did Not Get an HIV Test Within 12 Months Prior to Participating in the Survey

REASON	n	%
Thought They Were Unlikely to be Exposed to HIV	119	34
Thought They Were HIV Negative	95	27
Did Not Know Where to Get Tested	35	10
Did Not Want to Think About Being HIV Positive	9	3
Did Not Have the Time	9	3
Afraid to Find Out They Had HIV	6	2
Did Not Want to Worry or Upset Family Members	4	1
Did Not Want People to Think They are Drug Users	4	1
Worried About Who Would Find Out About Test Results	3	1
Other Reasons	16	5
Unknown	55	15
TOTAL	355	100

Note: Percents do not add up to 100 due to rounding.

California Department of Health Services, Office of AIDS

(both at 16 percent; 20/125), prenatal care/obstetrician's clinics [PNC/OB clinic] (15 percent;19/125) and in hospitals (14 percent; 18/125) [Figure 2]. Sixty-six percent (83/125) of those who tested said their most recent test was in California, 14 percent reported getting tested in Mexico (17/125), while 6 percent (8/125) tested in a state other than California. Eighty-eight percent (110/125) were residing in the same state or country where they last tested for HIV.

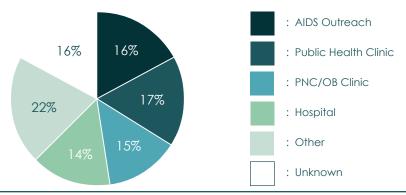
HIV Perceptions

One way to assess risk in the MSFW population is to ask about self-perceived risk. When asked about their self-perceived risk of contracting HIV, 76 percent of the respondents

(305/400) thought that they were not at risk or had a low risk for getting HIV; 16 percent (65/400) thought they were at medium or at high-risk of getting HIV. Eight percent (30/400) did not know or did not respond to the question. Bivariate analysis revealed that perceived risk was associated with female gender and not having a partner. Males and those who were either single, divorced, or separated had a higher perceived risk of getting HIV compared to females and those who are married or had a live-in partner (Table 7).

Statements to assess personal and interpersonal HIV knowledge, attitudes, and behavior were also asked of respondents.

Figure 2. Venues Most Commonly Used by Seasonal and Migrant Farm Workers for Taking an HIV Test



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HITS 2002

Table 7. Factors Associated With Self-Perceived HIV Risk Among Seasonal and Migrant Farm Workers

FACTORS		Significance	Odds Ratio	95% Significance Interval
Gender	Male	P < .05	1.9	(1.0 - 3.5)
	Female		1.0	
Having a Partner	Single/Divorced/Separated	P < .01	2.1	(1.2 - 3.7)
	Married/Live-In		1.0	

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Over 70 percent of respondents disagreed with the statement that either having oral or anal sex without a condom was safe if there was no ejaculation. Thirty-nine percent of respondents agreed with the statement that HIV was not a threat to them. Interestingly, 40 percent of respondents agreed with the statement that by taking the new HIV drug combinations, people

Table 8. Agreement With Statements Regarding HIV-Related Knowledge, Attitudes, and Beliefs of Migrant and Seasonal Farm Workers

		N = 400	
STATEMENT	Agree (%)	Disagree (%)	Unknown (%)
If you have HIV but feel well, medical care can help you live longer and stay healthier.	86	9	5
People you have had sex with want to know if you have had the HIV test.	35	59	6
Many of your friends have gotten the HIV test.	23	70	7
You are less careful about being safe with sex or drugs than you were five years ago because there are better treatments for HIV now.	11	84	5
By taking the new HIV drug combinations, people who are HIV positive decrease the chances that they will infect their partners with HIV.	40	55	5
Having oral sex without a condom is safe if there is no ejaculation.	18	77	5
Having anal sex without a condom is safe if there is no ejaculation.	12	83	5
You are burned out on thinking about HIV.	12	82	6
People are less careful about avoiding HIV today because they are tired of being safe.	25	70	5
You often tune out message about HIV.	22	73	5
You have heard enough about AIDS, and don't want to hear anymore about it.	18	77	5
People who got infected with HIV through sex or drug use got what they deserved.	26	69	5
The thought of being around someone with AIDS does not bother you.	51	43	6
You would not avoid a friend if she/he has AIDS.	54	41	5
You would date someone who is infected with HIV.	18	77	5
HIV is not a threat to you.	39	55	6
You are less concerned about getting HIV than you were five years ago because there are better treatments now.	8	85	7
Sometimes you do things where you might get HIV because you are tired of being careful.	8	85	7
HIV is not your problem; It's somebody else's.	29	65	6

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who are HIV positive decrease the chances that they will infect their partners with HIV (Table 8).

Awareness of current HIV testing policies is low in this population. While anonymous HIV test sites are available in the counties where the survey was conducted, only 31 percent (122/400) said that one can test for HIV anonymously in California. Only 15 percent (60/400) were able to name a specific facility or clinic where one can get an anonymous HIV test.

Similarly, this population has little awareness of HIV reporting policies in the state. More than four-fifths of all respondents did not know if reporting of names, reporting of name and code, reporting of a unique identifier number, or reporting of non-identifying information such as

age and gender is required (Table 9). Ninety percent also reported not knowing if names are reported to the Federal Government for those who test positive for HIV. More than three-quarters did not know if there were any changes in policies for HIV testing or reporting in California in the last two years.

Sexual Identification and Behavior

All respondents in the survey identified as heterosexual. There was no reported homosexual activity by any of the respondents. Eighty-three percent (332/400) of all respondents claimed they were sexually active in the past 12 months.

Table 9. Proportion of Migrant and Seasonal Farm Workers Who are Aware of HIV Testing and Reporting Policies

		N =	400	
HIV TESTING/REPORTING POLICY	Agree (%)	Disagree (%)	Unknown (%)	Non Response (%)
Reporting by Name in California	5	4	86	5
Unique Identifier Reporting in California	3	2	95	5
Name-to-Code Reporting in California	2	1	92	5
Demographic Information Reporting Only in California	1	2	91	6
Name Reporting to Federal Government	1	2	90	6
Aware of Changes in HIV Testing or Reporting Policies	1	16	77	6

Female Sexual Behavior

Among females, the median age for first anal or vaginal sex without a condom was 19, while median age for participants using a condom was 21. Of the 139 women who participated in the survey, 85 percent (n=118) reported being sexually active in the past 12 months. All sexually active female participants reported having only one male partner in the past 12 months. Of the sexually active females, 115 reported having vaginal sex with their primary sex partner. During vaginal sex with their primary partner in the past 12 months, 61 percent reported never using condoms, 24 percent reported inconsistent use of condoms, and 10 percent reported consistent condom use. Sixteen percent (n=18) of those who had a primary sex partner reported having anal sex. During anal sex with their primary male partner in the past 12 months, 83 percent reported not using any condoms, 6 percent reported inconsistent condom use, and 11 percent reported using condoms at all times (Table 10). Six percent (7/115) reported they did not know if their primary male sex partner was HIV infected.

Only one of the 115 females who had been sexually active in the past 12 months reported

having a non-primary male partner. None reported exchanging money or drugs for sex or having sex with another woman in the past 12 months.

Male Sexual Behavior

Median age for first anal or vaginal sex without a condom for males was 17 while median age using a condom was 18. Of the 261 male participants in the survey, 79 percent (n=206) reported ever having had sex with a woman. while 64 percent (n=166) reported having had sex with a primary female partner in the past 12 months. Seventeen percent (29/166) reported that they did not know if their primary female partner was HIV positive. Among those who reported having vaginal sex with their primary female partner in the past 12 months (n=161), 68 percent of males reported never using condoms, 28 percent used a condom inconsistently, and 12 percent always used condoms. Among those who reported having anal sex with their primary partner in the past year (n= 34), 68 percent never used condoms, and 29 percent used condoms inconsistently. None of those who had anal sex with their primary partner in the past year reported consistent condom use.

Table 10. Frequency of Condom Use by Female Seasonal and Migrant Farm Workers During Sex With Their Male Partner in the Past 12 Months

	Always (%)	Some- times (%)	Never (%)	Non Response (%)
Vaginal Sex With Primary Male Partner (n = 115)	10	24	61	5
Anal Sex With Primary Male Partner (n = 18)	11	6	83	0

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Twenty-four percent (63/261) of the male respondents reported having a non-primary sex partner in the past 12 months. Seventy-one percent (45/63) of male respondents did not know if their non-primary female sex partner was HIV positive. Among those who reported having vaginal sex with their non-primary female sex partner (n=62), 10 percent reported never using condoms, 26 percent reported inconsistent condom use, and 64 percent reported always using condoms. Among those who reported anal sex with a non-primary female partner, 20 percent reported never using condoms, 27 percent reported inconsistent condom use, and 53 percent reported using condoms at all times (Table 11).

Sixteen percent of all males (42/261) reported giving money or drugs for sex in the past 12 months. The median number of partners with whom they exchanged money or drugs for sex, was two. Twenty-two percent of those who

reported being single, divorced, or separated (25/112) reported they have given money or drugs for sex compared to 6 percent (17/286) among those who were married or had a live-in partner. Thirty-four percent (15/44) reported not using condoms or inconsistently used condoms when they had sex with a partner whom they exchanged money or drugs for sex. None of the male respondents reported having had sex with another male in the past 12 months.

STDs

Seventeen percent of all respondents (66/400) reported ever being tested for a STD, of those, half reported getting a STD test in the past year. Among those who had been screened for a STD, 14 percent (9/66) were tested for gonorrhea, 11 percent (7/66) were tested for chlamydia, and 8 percent (5/66) were tested for syphilis.

Table 11. Frequency of Condom Use by Male Seasonal and Migrant Farm Workers During Sex With Their Female Partner in the Past 12 Months

	Always (%)	Some- times (%)	Never (%)	Non Response (%)
Vaginal Sex With Primary Female Partner (n = 161)	10	28	60	0
Anal Sex With Primary Female Partner (n = 34)	0	29	68	3
Vaginal Sex With Non-Primary Female Partner (n = 62)	64	26	10	0
Anal Sex With Non-Primary Female Partner (n = 15)	53	27	20	0
Condom Use With a Female Partner Who Received Money or Drugs in Exchange for Sex (n = 44)	61	23	11	5

Substance Use and Needle Use

Thirty-one percent of all respondents (122/400) reported ever having used needles to inject drugs, vitamins, or antibiotics, with three percent (13/400) doing so in the past 12 months. The median age for first injecting drugs, vitamins, or antibiotics was 19. Thirteen percent (16/122) reported using a non-sterile needle the first time they injected. Six respondents reported parenteral administration of antibiotics in the past month.

Thirty-eight percent of all respondents reported consuming five or more alcoholic drinks on any

single day in the past month. The median number of days that respondents reported having five or more drinks in the past month was three.

Twenty-eight respondents reported having used drugs to get high. Marijuana and cocaine were the most commonly used drugs to get high. Among those who have ever used drugs, 60 percent reported marijuana use and 46 percent reported cocaine use in the past month (Table 12).

Table 12. Prevalence of Substance Use in the Past Month Among Seasonal and Migrant Farm Workers Who Reported Having Used Drugs to Get High

SUBSTANCE	Prevalence (%)
Marijuana	60
Cocaine	46
Amphetamines	14
Crack	14
LSD	14
Heroin	11
Downers (e.g., Valium, etc.)	7
Solvents (e.g., Thinner, Resistol, etc.)	7
Club Drugs (e.g., Ecstacy, GHB, Ketamine, etc.)	4

Prevention Activities

Among the different channels to disseminate HIV prevention information, mass media had the greatest reach among migrant and seasonal farm workers. More than three-quarters of all respondents had heard HIV prevention messages broadcasted through radio or television. Nearly half reported receiving HIV prevention messages through health centers while over one-quarter reported seeing HIV prevention messages through billboards (Figure 3). Only ten percent (38/400) of respondents reported having seen billboards or signs advertising HIV drugs. Less than one percent of respondents (3/400) reported having called an AIDS hotline in the past year. About one-third of all respondents (137/400) reported having received a brochure about protecting oneself from HIV or STDs. Most respondents reported receiving the brochure through clinics and health centers and through outreach efforts conducted in migrant camps. Thirty-seven percent reported receiving free condoms in the past 12 months and reported health clinics and health centers as the primary source of free condoms. Nineteen percent

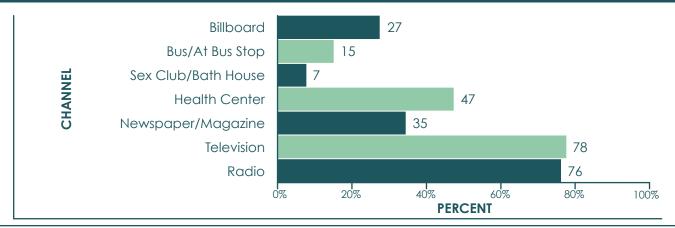
(76/400) reported having talked to an outreach worker or promotora about HIV or STDs in the past 12 months.

Pregnancy and Prenatal Care

Forty-two percent of all females (58/139) were pregnant in the past five years. Of those who were pregnant in the past five years, 91 percent (53/58) reported receiving prenatal care in California. Only 62 percent (33/53) reported that a medical provider or a health care worker talked to them about getting an HIV test and 55 percent (29/53) reported getting an HIV test during their most recent pregnancy.

The reasons pregnant women did not test for HIV during pregnancy included: not being offered an HIV test (54 percent; 13/24), believing they are not at risk for HIV (29 percent; 7/24), and previously tested for HIV and did not think they needed to be tested again (8 percent; 2/24). Only 68 percent (94/139) of all females surveyed thought that an HIV-positive woman can get treatment to reduce perinatal HIV transmission.

Figure 3. Relative Reach of the Different Channels for Disseminating HIV Prevention Messages to Migrant and Seasonal Farm Workers



California Department of Health Services, Office of AIDS



The 2002 HITS study focused on HIV testing patterns and risk behaviors among migrant and seasonal farm workers in three California counties—San Joaquin, Solano, and Yolo.

The 2002 HITS found that 69 percent of MSFW had never tested for HIV infection. Only 45 participants reported having tested for HIV infection within 12 months of the interview date. Of these, only three claimed to have tested for HIV without delay. The primary reason for delaying testing for the remaining 42 was they perceived themselves to not be at risk for HIV.

This survey indicates that the majority of MSFW have correct knowledge regarding HIV transmission, but a substantial number of women were not informed about accessing anonymous HIV/AIDS counseling, treatment, and care. Some pregnant women also believed that because they had been tested for HIV during their previous pregnancy, they did not need to be tested again. Over one-third of all respondents reported knowledge of an anonymous test site in California. Eighty-one percent of the respondents had no knowledge of any changes in California's HIV reporting policy or how HIV is reported (i.e., name, unique identifier, non-name code).

HITS findings indicate that consistent condom use among MSFW is low, particularly among males having sex with a primary partner. A significant proportion of surveyed men (24 percent) had sex with non-primary sexual partners during the past 12 months and 23 percent of them never used a condom or used condoms less than half the time. Fifteen out of 63 men (24 percent) had also reported having anal sex with their casual sex partners and half of them never used a condom. The perception of becoming infected with HIV among those

men who engaged in high-risk sexual behavior (had sex with multiple partners) was three times higher as compared to those who did not. Twelve percent of men who reported having sex only with their primary partners believed that they were at risk for HIV infection as compared to 34 percent of men who had sex with non-primary partners during the past 12 months.

The prevalence of unprotected sex among surveyed female MSFW was 61 percent for vaginal sex and 83 percent for anal sex. However, compared to males, all but one of 115 surveyed women reported that they had sex only with a primary partner.

Risk related behaviors such as alcohol use and drug use are prevalent among MSFW in this particular study. Only four percent of the respondents (17/400) had injected drugs during the past 12 months using a non-sterile needle.

Similar to previous research conducted among migrant and seasonal farm workers, barriers were encountered in this study in the attempt to capture accurate and unbiased responses to questions. Participants often required interview staff to explain the meaning of a word or phrase and the primary language spoken by some participants was from indigenous Mexican groups, with Spanish as a secondary language. In general, this caused a lack of effective communication. The sensitivity of the subject matter posed somewhat of a difficulty for staff to interview opposite gender participants. The study revealed a cultural understanding of the separate male and female family roles that essentially influenced the participant's openness or reluctance with responses to questions. Participants also had difficulty responding to rated questions (i.e., HIV

perceptions). Culturally, most Latinos answer objectively with either a "yes" or "no" and do not understand the gradient differences in the rated-type questions. The repetitive nature of some of the questions on the survey, as well as the Spanish language translation of particular questions using double negatives were a disadvantage towards conducting the interview in a timely manner. Under these circumstances, additional survey time was needed to complete the interviews.

Additionally, there are limitations to this study. HITS used a convenience sample and because of this, the sample surveyed may not accurately reflect MSFW in other areas of California or the United States. However, despite these barriers and limitations, our findings across three counties surveyed show little variation in results.

The results from HITS did indicate there is a need for increased HIV/AIDS counseling and testing, as well as the promotion of condom use among the MSFW population, particularly among single men and those men who migrate to California without their spouses. This study shows that the role of medical providers, sexual partners, friends, and outreach workers is largely influential in promoting HIV testing. HIV/AIDS testing sites should be accessible and affordable to MSFW since the majority of

MSFW spend a large percentage of their day in the fields and often cannot spare the time or the expense to obtain health information, tests, treatment, and medical care. MSFW need HIV health care services and information to be easily available to them, including where to go to obtain an anonymous HIV test.

HITS provided insight into a more pressing need for HIV prevention service providers to have a deeper understanding of sexual cultures among MSFW in California. Providers need to consider sexual diversity with regard to gender, sexual orientation, social class, and rural or urban settlement. Furthermore, there is a need to understand the sociocultural contexts of MSFW and how these migrants contribute to shaping such contexts, particularly emphasizing on HIV risk and prevention. Finally, HIV prevention workers would greatly benefit from helping MSFW develop goals and behaviors to reduce risk for HIV while still bearing in mind the social and cultural experiences that directly affect the values, traditions, and practices of MSFW.

Finally, HIV prevention workers must consider the social and cultural experiences that directly affect the values, traditions, and practices of MSFW when helping MSFW develop goals to reduce HIV behavior risks.





HITS 2002: HIV Testing Survey Among Migrant and Seasonal Farm Workers

- 1 Ruiz JD, Molitor F, Community-based HIV/STD prevention interventions among a community of migrant farm workers in California. California HIV/AIDS Update, California Department of Health Services, Office of AIDS, 11(2):21-25.
- Rosenberg HR, Steirman A, Gabbard SM, Mines R. Who works on California farms? Demographic and employment findings from the National Agricultural Workers Survey. Office of the Assistant Secretary for Policy, Office of Program Economics, U.S. Department of Labor, NAWS Report No. 7. 1998.
- ³ CDC. *HIV infection, syphilis, and tuberculosis screening among migrant farm workers. Florida*, 1992. Morbidity and Mortality Weekly Report, Oct 1992. 41(39):723-725.
- Montoya ID, Bell DC, Richard AJ, Goodpastor WA, Carlson J. Barriers to social services for HIV-infected urban migrators. AIDS Education and Prevention, 1998;10(4):366-379.
- Ruiz JD, Da Valle L, Jungkeit M, Platek G, Mobed K, Lopez R. Seroprevalence of HIV and syphilis, and assessment of risk behaviors among migrant and seasonal farm workers in five Northern California counties. California Department of Health Services, Office of AIDS, HIV/AIDS Epidemiology Branch. June, 1997.
- ⁶ McCoy HV, Wasserman. *Gender differences in condom usage among rural crack-using men and women*. Women's Health, 2001;34(1-2):143-162.
- Balls Organista P, Organista KC, Culture and gender sensitive AIDS prevention with Mexican migrant laborers: a primer for counselors. Journal of Multicultural Counseling and Development. April 1997. 25:121-129.
- ⁸ Organista KC, Organista PB. *Migrant laborers and AIDS in the United States: a review of the literature*. AIDS Education and Prevention, Feb 1997. 9 (1): 83-93.
- Magana JR. Sex, drugs, and HIV: an ethnographic approach. Social Science and Medicine. 1991;33(1):5-9.
- ¹⁰ Lafferty J. Self-injection and needle sharing among migrant farm workers. American Journal of Public Health. 1991 Feb;81(2):221.

Appendix: Survey Instrument

HIV TESTING SURVEY Among Seasonal and Migrant Farm Workers

Subject ID Code: SJ / YO/ SO	Place of Interview:
(Circle County Initials)	(Name of site)
Interviewer's Initials:	
Date of interview: / D D / Y Y Y Y)	Time began::
Interview language: \square 1 English \square 2	Spanish
SAY: I'd like to thank you again for taking part in information you give me will be private and your First, I would like to ask you some background qu	name will not appear anywhere on this form.
1. What is your age? YEARS [if respondent is less than 18 years old, or respondent for time.]	discontinue questionnaire and thank
 Would you describe yourself as: [Read choing of the last of the last	ices]
If Transgender, ask:	
.2a. Are you? [Read cl	hoices] ale, or \square 2 Female to male
3. What is the highest grade in school you com	npleted? [Read choices, check only one]
2 Primary school	
3 Secondary school	
4 High school graduate	
Some college/associate degree	
Other	

	9Don't know/Refused to answer
	What best describes where you live right now? [Read choices, check only one] 1Rent home or apartment 2Own home 3Live with friends or family without paying rent 4Live in hotel or rooming house 5Homeless 6Living in a migrant camp 7Other (Specify) 4a
5. Wh	o else lives with you? (Read choices. Check all that apply.) 1 Only with family members 2 With several families 3 With other migrant workers 4 Live alone 5 Other (specify) 5a. 9 Don't know/Refused
6. Wh	nat is your marital status? \[\begin{align*} \text{ Married and your spouse travels with you} \\ \text{ 2 Married and your spouse stays in home country} \\ \text{ 3 Member of an unmarried couple (living in)} \\ \text{ 4 Separated/divorced/widowed} \\ \text{ 5 Single, never married} \\ \text{ 6 Other: (specify) 6a.} \\ \text{ 9 Refused} \]
	7. What is the main language you usually speak at home? $\hfill \square$ $_1$ $Spanish$

☐ 3 Other: (specify): 7a	
☐ 9 Refused	
Do you consider yourself to be Hispanic or	Latino?
Do you consider yourself to be Hispanic or No Yes	Latino !
If YES, ask:	
8.a Which group(s) best descril	bes your ancestry? [Read choices, check all the
apply/ 1 Mexican	G Dominican
2 Puerto Rican	☐ 7 Spanish or Portuguese
☐ ₃ Cuban	□ s Other
4 Central American	98 Unknown
□ 5 South American .	99 Refused
5 South American .	■ 99 Neidsed
or Yes for each one	er yourself to be in? [Read choices, check No
a. Asianb. Black/African Americanb. American Indian/Alaskan Native	
b. Black/African Americanc. American Indian/Alaskan Native	
b. Black/African American	10. What country were you born in?

11. What is your present occupation?	(Read choices)
☐ 1 Farm or field worker	
2 Canning industry worker	
☐ 3 Housewife (sk	ip to #14)
☐ 4 Do not Work — (sk	ip to #14)
5 Other (specify): 11a	
9 Don't know/Refused	
12. Do you work in this area only and do	o not go from place to place to work?
□ o No	r
☐ 1 Yes	
2 Other (specify): 12a	
9 Don't know/Refused	
12 D	6 4
13. Do you stay in one camp and not mo	ve from crop to crop?
☐ 1 Yes	
2 Other (specify): 13a	
9 Don't know/Refused	
9 Don't know/Keruseu	
	nonthly income over the past year from all sources,
including public assistance before taxes?	GIVE RESPONDENT FLASHCARD A, check only
one answer]	
Less than \$500 per mon	th
2\$500 - \$1000 per month	1 5 \$2,000 or more per month
3\$1,000 - \$1,500 per mor	7 Refused to answer
15. In relation to your household monthl say is true? <i>(Read choices)</i>	y income, which of the following situations would you
a can pay for living expenses	and save some money
2 can pay for living expenses	-
	ses/ has serious economic problems

	4 other
	9 Don't know/ Refused
16.	I would like to ask you about your health insurance. Please answer yes or no to each of the following questions. Are you currently covered by <i>[Read choices, check No or Yes for each one]</i> ?
	a. Medicaid (government insurance for people with low incomes)? (In California: Medi-cal) b. Medicare (government insurance for the elderly and disabled)? c. Tricare, formerly called CHAMPUS? d. Veterans Administration coverage? e. Private health insurance or HMO (paid for by you, a family member, an employer or a union)? f. Do you have any other kind of health insurance? lambda
HI	V TESTING EXPERIENCES ': Now I'm going to ask you a few questions about getting tested for HIV. An HIV test
SAI	checks whether someone has the virus that causes AIDS.
17.	Have you ever been tested for HIV, even if you did not get the results? No Yes Skip to page 15, #39 18. How many times have you been tested? Times
19.	Did you get the results every time you were tested? No Yes 1
	If NO, ask: Skip to next page, #20

	19.a. Time		w mar	ny tim	ies we	ere you	ı teste	d fo	HIV	and go	ot the	resu	lts?			
	19.b.		d cho You the you te	<i>ices,</i> hough ested	check It the to HIV po	esults for a No or esting positive	Yes foo	or ea	ch on I conta	e] act you	if	 ЦО	0		YES	}
		ii.	You v	vere a	fraid c	of getting	g the i	resul	t				0		🗖	1
		iii.	You v	vere to	oo bus	sy or for	got					🗖	0		🗖	1
		iv.		ad to		out of th	ne are	a, ma	aking t	ravel		🗖	0		🗖	1
						on						🗖	0		🗖	Ì ₁
)	From h	u get	ting te	ested	on a r			s, su	ch as	every	six m		J			
)	Are you	u get	ting te	ested	on a r			s, su	ch as		six m		J			
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ne (Are you every y No O O O O O O O O O O O O O O O O O O	interedly to	u get y	vour fi	Yes I people in the	v test?	- HIV	Real Real Real Real Real Real Real Real	efused 7 Are aroices,	every to answ Y Y ny of the	six m	[99/ owing	s or 9999 g <u>rea</u> s for	the sons eac	sam an't why ch or 'es	e e

	e.	Because you might have been exposed to HIV through drug use? \square 0 \square 1
Did	VAII (get tested
Diu	you g f.	Because you had a health problem that might be from HIV? \square 0 \square 1
	g.	Because you were concerned you could give HIV to someone? \square 0 \square 1
	h.	
	i.	Because you wanted to know where you stood?
Did	j.	get tested Because you or your partner were pregnant or wanted to have
	k.	a child?
	l.	Recause it was part of a sevually transmitted disease or
		routine medical check-up? 1
	m.	Because you had to for an insurance exam, the military, court order, or jail/prison?
		/ES to 22m] What was the reason you had to be tested? Was it for: [Read lices, check No or Yes for each one]:
		NO YES
		Insurance exam \square 0
		Military <u> </u>
		Court order 🔲 0 🔰 1
		Jail/prison
22.n	. Is th	nere any other important reason why you got an HIV test that I haven't mentioned? No Yes
		□ 0 □ 1 If YES, Specify:
		ewer: If only one reason given above, circle the letter and also write it in # more than one reason given above, then ask:]
		b. Which of these reasons was the most important reason you got an HIV test?
	-	son chosen as the most important reason. Also, write the letter of the
		in reason in the box below.]
		Main Reason [refused=7, don't know=9]
23.		last time you were HIV tested, did someone at the testing place work with you on a to help protect yourself from HIV or sexually transmitted diseases?
	No	Yes Viscontinuation of sexually transmitted diseases? Yes Don't know

Yes Refused to answer
Skip to page 10, #32 Skip to page

25.	When did you first test posit	ive for HIV? /	[99/9999= can't
reca	II]	(M M / Y Y Y	Υ)
_		`	•)
26.	,	itive, where did you get tested?	
Writ	e down site name and classify tha	t site, probe with additional question	s if necessary. Choose only one
ite t	/pe.]		
	Site:		
	AIDS prevention or outreach	program outside a clinic	. 🖳 01
	HIV counseling and testing	site	. 🖳 02
	Sexually transmitted disease	clinic	. 🔲 03
	Community health center/Pu	blic health clinic	. • 04
	Family planning clinic		05
	Prenatal/Obstetrics Clinic		. \square 06
	Other clinic (Specify:)	. • 07
	•		
		ling HMO)	1 b
	`	orison)	
	,		
			1 b
	Don tremember		. 🛥 99
7.	In what ITS state or other country	did you have this first positive HIV te	st?
,,.	·	al Code for State. Canada=	
	Rico=PR, Dom. Rep.=DF		CIA, MEXICO-INA, Fuelto
	Kico-PK, Dolli. KepDi	k, Other Countries-OC	
28.	Were you living in	[say state/country from above	el when you had your first
	tive HIV test?		· , · · · · · · · · · · · · · · · · · · ·
	No		Yes
	If NO, ask:		Skip to next page, # 30

	29.	What state or country were you living in?
l		
30.		king about the first time you tested HIV positive, was it anonymous? This means you lot give your name to get tested. Usually you are given a number to get your test t.
	No	Yes Refused to answer
	$\bigcup_{0}^{\text{Don}'}$	t Know
		O.a. When you first tested positive, did you give your real first and last name? No Yes O, ask:
31.		first time you tested positive for HIV, what kind of HIV test was used? [Read ces, check only one]
		A blood test, where someone drew your blood with a needle and you had to return
		in a few weeks for the results
	_ 2.	A rapid test, where someone drew your blood and you got the results within a few hours or less
	_	A saliva test, where you or someone else took a swab from your mouthA urine test
	_	A home test kit, where you used a self-sampling kit to get a blood sample
	 6.	A home test kit, where you used a self-sampling kit to get a blood sample Or some other type of test Refused to answer

Skip to SAY box on page 16 before #41

[SECTION FOR PERSONS WHO HAVE TESTED HIV NEGATIVE] [If tested more than once (refer to Page 6, #18), read the word "last" in the following questions.]

32. The next few questions are about your most recent, or "last", test for HIV. The last time you were tested for HIV, where did you get tested?

[Write down site name and classify that site, probe with additional questions if necessary. Choose only one site type.]

	AIDS prevention or outreach program ou	
	HIV counseling and testing site	
	Sexually transmitted disease clinic	
	Community health center/Public health c	
	Family planning clinic	
	Prenatal/Obstetrics Clinic	<u></u> 06
	Other clinic (Specify:)
	Hospital	
	Drug treatment program	<u>_</u> 09
	Private doctors office (including HMO).	<u>_</u> 10
	Correctional facility (jail or prison)	🔲 11
	Blood bank	12
	Military	13
	Home collection kit	
	Other	15
	Don't remember	 99
	In what U.S. state or other country did you [Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co	r State. Canada=CN, Mexico=MX, Puerto
1.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co	r State. Canada=CN, Mexico=MX, Puerto
ļ.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co.] Were you living in [say statement of the stateme	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ste/country listed above] when you had your (last)
ļ.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co Were you living in [say statest?] No	r State. Canada=CN, Mexico=MX, Puerto untries =OC]
ļ.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co Were you living in [say start HIV test?]	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ute/country listed above] when you had your (last) Yes 1
1 .	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co Were you living in [say statest?] No	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ste/country listed above] when you had your (last)
·-	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co Were you living in [say start HIV test?]	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ute/country listed above] when you had your (last) Yes 1 Skip to next page, #35
•-	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co.] Were you living in [say statest?] No 0 , ask: 34.a. What state or country were you live.	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ite/country listed above] when you had your (last) Yes 1 Skip to next page, #35
1.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co.] Were you living in [say statest?] No 0 , ask: 34.a. What state or country were you live.	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ste/country listed above] when you had your (last) Yes 1 Skip to next page, #35 ving in? ode for State. Canada=CN, Mexico=MX, Puerto
ŀ.	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co.] Were you living in [say stated HIV test?] No 0 , ask: 34.a. What state or country were you live [Use two character Postal Control Rico=PR, Dom. Rep.=DR, Other co.]	r State. Canada=CN, Mexico=MX, Puerto untries =OC] te/country listed above] when you had your (last) Yes In Skip to next page, #35 Ving in? ode for State. Canada=CN, Mexico=MX, Puerto ner countries=OC]
•-	[Use two character Postal Code for Rico=PR, Dom. Rep.=DR, Other co.] Were you living in [say stated HIV test?] No 0 , ask: 34.a. What state or country were you live [Use two character Postal Control Rico=PR, Dom. Rep.=DR, Other co.]	r State. Canada=CN, Mexico=MX, Puerto untries =OC] ste/country listed above] when you had your (last) Yes 1 Skip to next page, #35 ving in? ode for State. Canada=CN, Mexico=MX, Puerto

No					Yes	Dor
☐ ₀ If NO, a	sk:				1	
35.a.	real first and last r	•	ested, did you giv Don't Know	e your		
	time you were to	ested for HI	V, what kind of HI	V test was u	▼ used? [Rea	▼ d choices
□ 1 A	a blood test, who	ere someone	e drew your blood v	vith a needle	e and you l	had to retui
_	n a few weeks fo					
□ 2A	a rapid test, whe		s drew your blood an	nd you got t	he results	within a fe
2 A	a rapid test, whe	re someone	drew your blood an			
h 3A	a rapid test, whe ours or less a saliva test, who	re someone				
h 3A	a rapid test, whe ours or less a saliva test, who a urine test	ere someone	drew your blood an	swab from	your mout	h
h 3A 4A	a rapid test, whe ours or less a saliva test, who a urine test a home test kit, v	ere someone ere you or so where you u	drew your blood an	swab from	your mout	h
h 3A 4A 5A	a rapid test, whe ours or less a saliva test, who a urine test a home test kit, who or some other types.	ere someone ere you or so where you u pe of test	drew your blood an	swab from	your mout	h
h 2 A 3 A 4 A 5 A 6 C	a rapid test, when ours or less a saliva test, who a urine test a home test kit, when other types are to answer the control of	ere someone ere you or so where you u pe of test	drew your blood an	swab from	your mout	h
h h 3 A 4 A 5 A 6 C 9 E	a rapid test, whe ours or less a saliva test, who a urine test a home test kit, who or some other types.	ere someone ere you or so where you u pe of test er	drew your blood and omeone else took and aself-sampling st?	swab from	your mout blood sam	h
2A h 3A 4A 5A 9D	A rapid test, whenours or less A saliva test, who A urine test A home test kit, whenour some other type Refused to answ Don't know d you get your (less	where you upe of test er	drew your blood and omeone else took a dised a self-sampling st? / / _ (M M /)	swab from g kit to get a	your mout blood sam	h nple
2A h 3A 4A 5A 6C 7F 9D	a rapid test, whenours or less a saliva test, who a urine test a home test kit, who are other type Refused to answ Don't know d you get your (I	where you where you where you where you where you where you was the state of test where the state of the stat	drew your blood and omeone else took a dised a self-sampling st? / / _ (M M /)	swab from g kit to get a g [99/9] Y Y Y	your mout blood sam	h nple

[SECTION FOR PERSONS HIV TESTED IN PAST 12 MONTHS]

38. Some people make up their minds to get an HIV test, and get tested right away. Others decide to get tested but delay for awhile; that is, they do not get tested right away. People delay for a variety of reasons. I'm going to read you a list of reasons why some people have delayed getting tested. Please tell me...

Did you delay getting Yes	tested in the past 12 months:	No
	nlikely you've been exposed to HIV?	0
b. Because you v	vere afraid of finding out you were that you had HIV)?	🗖 0
c. Because you the	hought you were HIV negative?	0
Did you delay getting	tested in the past 12 months:	
d. Because you d	lidn't want to think about being HIV positive?	🗖 0
e. Because you did	not know where to go to get tested in this area?	0 1
	e worried your name would be reported to nt if you tested positive?	o
Interviewer: If the answer to	38.g. You said you delayed testing because you was be reported to the government. Which of the name would be reported to:	e following did you worry your
item	[Read choices, check all the	hat apply:] No Yes
38.f. above is "Yes" ask the	: The processor and in process	
following	i. The government in general	
	ii. The local or state health department	$\overline{}$
question:	iii. The Immigration and Naturalization Serv	rice (INS)
-	iv. Welfare	🗖 0 1
Otherwise	v. Parole officer, the courts, or the police	0 1
continue below	vi. Some other part of the government If YES, Specify:	
\downarrow		

No Yes

find out about your test results?	_ 0
Did you delay getting tested in the past 12 mor i. Because you didn't have time?	nths: 0
j. Because you were concerned your name to your insurance company or employer	would be reported if you tested positive?
k. Is there any other important reason why you delatest in the past year that I have not mentioned?	ayed getting an HIV
If Yes, Specify:	
Interviewer: If ALL answers are checked "No" above ask:	38l. You selected no reasons why you
	delayed testing. Does this mean you got HIV tested without any delays?
OTHERWISE If only one reason given, circle the letter above and mark the letter in #38.m.	No Yes $\square_0 \qquad \square_1$ If No, go to #38.m. If Yes, go to Page 16, #40
If more than one reason given above, then ask;	
38.m. Which of these reasons was the most HIV? [Read each of the above reasons and reason chosen as the most important corresponding to the main reason in	t reason. Also, write the letter
Main Reason	[refused=7, don't know=9]
38.n. How long did you delay before your	last test? Was it:
1Less than a month	3 6 to 11 months
21 to 5 months	4 12 months or more
Skip to page 16, #40	

[THIS SECTION FOR PEOPLE WHO HAVE NOT TESTED IN THE LAST YEAR]

39.	2 2	you a list of reasons why some people have not been tested for HIV. Please tell gare reasons why you have not been tested <i>in the past 12 months</i> :
	Did you n	ot test in the past 12 months: No Yes
	a. Because it's unl	likely you've been exposed to HIV? \square_0 \square_1
	HIV positive (tl	ere afraid of finding out you were hat you had HIV)?
	c. Because you the	ought you were HIV negative? $\underline{\square}$ 0 $\underline{\square}$ 1
		dn't want to think about being HIV positive? $\bigsqcup_{i=1}^{n} 0$
	e. Because you die	d not know where to get tested in this area? $\bigcup 0$ $\bigcup 1$
Did	you not test in the j	past 12 months:
	f. Because you we reported to the	ere worried your name would be government if you tested positive?
the iter is "foll que	erviewer: If answer to n 39.f. above Yes" ask the owing ——— estion: nerwise, ntinue below	39.g. Which of the following did you worry your name would be reported to: [Read choices, check No or Yes for each one] No Yes i. The government in general
Did	▼ you not test in the	past 12 months:
Dia	h. Because you w find out about y	vere worried about who would your test results?
		dn't have time? $\square_0 \ldots \square_1$
	j. Because you we to your insurance	ere concerned your name would be reported ce or employer if you tested positive?
	k. Because you die	dn't want to worry or upset family members? \square 0 \square 1
	1. Because you the	ought your friends might react badly?

	Did you not test in the	e past 12 months:		NO	Yе
m. Becaus	se you thought your health ca	re provider would	0 1		
		think you were gay?			
o. Becaus	se you didn't want people to	think you were a drug user?	0 1		
p. Because for HI	se you didn't want people to V?	think you were at risk	0 1		
q. Becaus felt di	e you felt you might be treate scriminated against?	ed differently or	0 1		
		why you did not get an HIV mentioned?			
letter in 39.		iiven, circle the letter ns were chosen go to			<u>1e</u>
39.s.	Which of these reasons was	the most important reason yo	ou did not get tested	for HIV	in
		of the above reasons and sen as the most importal in the box below.]			
	Main Reason:	[refused=7, don't know=	:97		

[NEXT QUESTIONS FOR ALL HIV NEGATIVES OR UNTESTED] HIV PERCEPTIONS

40.		are your chances of getting infected wit d choices, check only one]	h HIV, the vii	rus that cau	ses AIDS	S? Would y	ou say:
		High	None				
	\square_2	Medium	Refused to	answer			
	3 3	Low	Don't know	7			
[ΤΗ	IIS SI	ECTION IS FOR ALL PARTICI	PANTS]				
SA Y	: Next	, I'm going to read some statements. So	me people agi	ree with the	ese statem	nents and ot	her people
		t. We are interested in your opinion, an		•			
		ach one, please tell me how strongly you PONDENT FLASHCARD B]	agree or disa	gree with t	he statem	ent. [GIVE	•
	KLS	FONDENT FEASITOAND BJ		Strongly Agree	Mildly Agree	Mildly Disagree	Strongly Disagree
	41.a.	If you have HIV but feel well, medical help you live longer and stay healthier.	care can	1	🗖 2	3	4
	b.	People you have had sex with want to hif you have had the HIV test	Know	1	🖵 2	3	4
	C.	Many of your friends have gotten the H	IIV test	🗖 1	🚨 2	3	4
	d.	You are less careful about being safe of drugs than you were 5 years ago becat better treatments for HIV now	use there are	🗖 1	🗖 2	🗖 з	 4
	e.	By taking the new HIV drug combination who are HIV positive decrease the character will infect their partners with HIV	nces that	🗖 1	🗖 2	🗖 з	4
	f.	Having oral sex without a condom is sathere is not ejaculation (cum)	afe if	1	🗖 2	3	4
	g.	Having anal sex without a condom is s is not ejaculation (cum).	afe if there	1	🗖 2	аз	4
	h.	You are burned out on thinking about I	HIV	1	🗖 2	3	4
	i.	People are less careful about avoiding because they are tired of being safe		🗖 1	<u>2</u> 2	3	4
	j.	You often tune out messages about HIV	V	🚨 1	🚨 2	🚨 3	4

Strongly

Agree

Mildly

Agree

Mildly

Disagree

Strongly

Disagree

	k.	People who got infected with HIV through sex or drug use got what they deserved	1	_ 2	🗖 3	4
	1.	The thought of being around someone with AIDS does not bother you	<u> </u>	<u>_</u> 2	🗖 3	4
	m.	You would not avoid a friend if s/he had AIDS	🔲 1	🔲 2	🔲 3	4
	n.	You have heard enough about AIDS, and don't want to hear anymore about it	🗖 1	2	🗖 3	4
	0.	You would date someone who is infected with HIV	ப 1	_ 2	🚨 3	. 4
	[In	terviewer: If respondent is HIV positive, #24=Yes	, skip to Q	uestion 42]	1	
	p.	You are less concerned about getting HIV than you were 5 years ago because there are better treatments now	1	🗖 2	 3	4
	q.	Sometimes you do things where you might get HIV because you are tired of being careful	<u> </u>	<u>_</u> 2	🗖 3	4
	r.	HIV is really not your problem; it's somebody else's	s 🔲 1	🖵 2	🔲 3	4
	S.	HIV is not a threat to you	🗖 1	2	3	4
42.		any of the following types of people ever suggested to deach item, check No or Yes for each one]	that you get	t an HIV tes	rt? Yes	
	a.	A doctor or other medical person			1	
	b.	A sex partner or lover			🔲 1	
	c.	A friend (not a sexual partner) or family member			🗖 1	
	d.	An outreach worker (Specify Organization:			🗖 1	
	e.	Someone from the health department suggested yo because one of your sex or drug contacts/partners has			🗖 1	

HIV TESTING POLICIES

SAY	tube or test result		us HIV test, where your name is not p	out on the blood		
43.	In CA are there pla	ces where you can ge	t an anonymous HIV test?			
	No	Yes	Refused to answer	Don't Know		
	 0		7	9		
S	kip to SAY box be	low It	f Refused or Don't Know, Skip to	SAY box below		
	43.a. Can you tel in CAJ?	I me the name of one	place where you can get an anonymou	us test		
	No	Yes	Refused to answer	Don't Know		
	\square_0	1	7	9		
	[If YES, wri	te down the name of one	e site]:			
			ve HIV test results to the health depart ne, please tell me if this is done in you			
44.		r name is reported to Is reporting by name	the health department if you test HIV e done in CA?	positive, unless you got		
	No	Yes	Refused to answer	Don't Know		
	\square_0	 1	7	9		
45.	positive. The uniq		er is reported to the health department may be made using part of your birthd porting done in CA?			
	No	Yes	Refused to answer	Don't Know		
	\square_0		7	9		
46.						
	No	Yes	Refused to answer	Don't Know		
	\square_0		7	9		
47.	department if you t		like your age and gender are reported your name is <i>not sent and no unique is</i> A?			
	No	Yes	Refused to answer	Don't Know		
	\square_0	 1	7	9		

48.	Do y	ou think that if you test positive for HIV th	at your name is reported to the fede	eral government?
	No	Yes	Refused to answer	Don't Know
49.		you heard of any changes in the policies f	or HIV testing or reporting in the la	ast two years in
	CA?			J
	No	Yes	Don't Know	
		, D ₁		
_				
	•	AY box, If YES, ask:	Skip to SAY box,	
ne.	xt page	<u>;</u>	next page	
		V	V	
	49.a.	What was the change? [Write answer on a	lina halowl	
	− 9.a.	what was the change: [write answer on t	ine belowj	
		[DO NOT PROMPT. Che	ck all codes below that apply]	
		1If a person tests positive, the test	site reports the results to the	
		state health department with a un	ique identification (ID) number.	
		2If a person tests positive, then the	e test site reports the results with	
		names to the state health departm	-	
		3If a person tests positive, the pers		n
			epartment turns the name into a cod	
			Ith department asks them to say wh	
		f a person tests positive, it is aga	m that they may have been exposed	
		with another person.	mist the law to have unprotected se	Λ
		6Other		
		9Heard there was a change, but do	on't know what the change was.	
	49.b.	How did you hear about this change? [Wi	rite answer on line helowl	
	.,			
			ck all codes below that apply]	
		1Media		
		2Friends/family/lovers 3Doctor		
		4HIV testing counselor		
		5Community Based Organization		
		6Health Department		
		7Other		
		9Don't know		
				abla

SEXUAL BEHAVIOR

SAY:

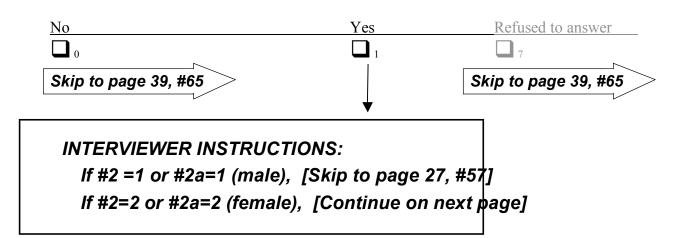
Next, I'll ask you some questions about sex. Again, the answers you give me will be private, and this paper does not have your name on it. It's important for the study that your answers be as accurate as possible. I need to ask all the questions even if some don't apply to your situation.

I am going to ask you about some types of sex where people have recommended using condoms to prevent HIV. Some of these types of sex may not have a high risk of getting HIV. We know that often people do not use condoms for many different reasons. We need to know what you are really doing, not what you think you are supposed to do.

Interviewer:

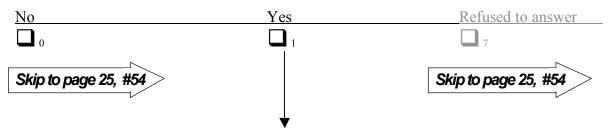
Use your discretion in using slang terms for the following sexual behavior questions.

50. During the past 12 months, have you had sex? By "sex" we mean only vaginal, oral or anal sex.



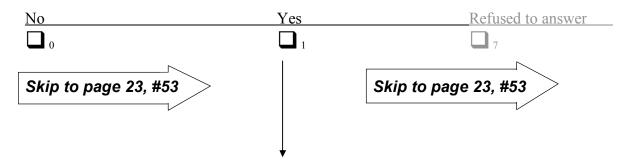
[FOR FEMALE RESPONDENTS ONLY]

51. Have you had sex with a man in the past 12 months?



Male Primary Partner (Female respondent)

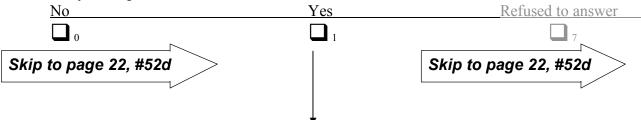
52. Have you been in a primary relationship with a man in the past 12 months? By primary, I mean a relationship with a man where you feel committed to him above anyone else AND where you have had sex together.



52.a. How many men have you had primary relationships with in the past 12 months?

__ _ MEN

52.b. In the past 12 months, have you had vaginal sex with a primary partner, where he put his penis into your vagina?



52.c. In the past 12 months, when you had vaginal sex with a primary partner, where he put his penis into your vagina, how often did he use a rubber or condom?

[GIVE RESPONDENT FLASHCARD C]

□ 0..... Never

□ 1..... Less than half the time
□ 2..... About half the time
□ 3..... More than half the time
□ 4..... Always

7..... Refused to answer

52.0	d. In the past 12 into your anu	months have you	ou had	anal sex w	vith a prima	ry partne	er, where	he put his	penis
	No			Yes			Refus	ed to ansv	wer
	0							7	
5	Skip to SAY bo	x below				Skip t	o SAY b	ox belov	N
				\	·				
Male Pri	mary Partner (F	emale respond	lent)						
52.6	rubber or con 0 No 1 Le 2 Al 3 M 4 Al	ess than half the bout half the tim ore than half the	time ne e time				ner, how	often did l	he use a
	ow I would like y imary partner.	ou to think back	k to <u>the</u>	last time	you had sex	x with yo	our (most	recent)	
52.1	The last time penis in your No	you had sex wit mouth? Yes	th this p	oartner, di	d you have Refused to		_	our partne Don't K	-
	0	<u> </u>			7	9			
		If YES:	52.g.	Was a c	ondom use Yes	d during	oral sex? Don't l		
52.h.	The last time in your vagin No	you had sex wit a? Yes	th this p	oartner, di	d you have Refused to	C	ŕ	e he put h	•
	0		1			9			
		If YES:	52.i.	Was a c	condom use Yes	_	vaginal s		

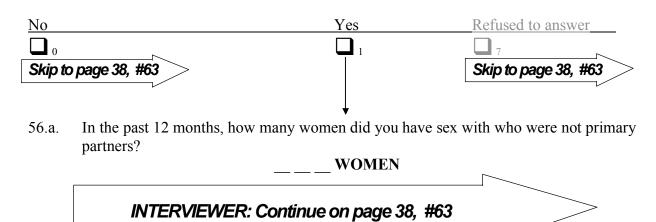
	52.j.	The last ti	me you had sex wi	th this partner, had	d you been drinking	alcohol before you
		No	Yes	Refused t	o answer	Don't know
		 0	<u> </u>		7	9
sex	52.k.	The last ti	me you had sex wi	th this partner, had	d you been using dr	ugs before you had
		No	Yes	Refused t	o answer	Don't know
		 0	<u> </u>		7	9
	52.1.	Does this p	artner have HIV, the	AIDS virus?		
		No	Yes	Re	fused to answer	Don't know
		\square_0			7	9
	No 0			Yes 1	_	7
	Skip	to page 25,	#54	↓	Skip to page 25	5, #54
	53.a.	In the past	12 months, how man	ny men did you have	sex with who were no	ot primary partners?
	53.b.		12 months, have yout his penis into you		ith a man who was no	t a primary partner,
		No		Yes	Refused to	answer
		\square_0				7
	Skip	o to #53d			Skip to #53a	
				↓		

53.d.	In the past 12 months, h where he put his penis in No	-	butt?	o was not a primary partner,	
Ţ,	0	Ye			
,	Skip to SAY box belov		1	Refused to answer	
	,		Skip to	SAY box below	
53.e.		•		who was not a primary partner NDENT FLASHCARD C]	
	Less than hal	If the time			
	2 About half th				
	3 More than ha	alf the time			
	4 Always 7 Refused to an	nswer			
SAY: The n	ext few questions are abo	out the last time	you had sex with a	non-primary partner.	
53.f.	The last time you had se your mouth?	ex with this partn	er, did you have ora	al sex, where he put his penis ir	1
	No	Yes	Refused to an	nswer Don't Know	_
	U 0	 1	7	9	
			g. Was a condon	n used for oral sex?	

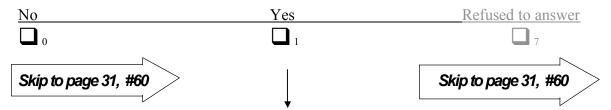
	in your vagina? <u>No</u>				
		Yes	Refused	d to answer	Don't Know
	 0		7		9
		If YES, ask:	53.i. Was a con	idom used during Yes	vaginal sex? Don't know
	\		0	1	9
53.j.	The last time you sex?	had sex with thi	s partner, had you be	een drinking alcoho	l before you had
	No	Yes	Refus	ed to answer	Don't know
	 0	 1		7	9
53.k.	The last time yo	ou had sex with	this partner, had ye	ou been using dru	ugs before you ha
ex?	No	Vac	Dafaa	ad to anarrow	Dog 't lyngyy
	No	Yes	<u> Refus</u>	ed to answer	Don't know
	U 0	1		7	9
53.1.	Does this partner	have HIV, the A	AIDS virus?		
	No	Yes	Refus	ed to answer	Don't know
	 0	 1		7	9
emale Pa	rtners (Female Re	spondent)			
	you had sex with a	-	ast 12 months?		
No			Yes	Refused to	answer
\square_0	_		<u> </u>	7	_
Skip	to page 38, #63	\geq		Skip to pag	ge 38, #63
			+		
mear		ith a woman wh	hip with a woman ir nere you feel comm		
No		J	Yes	Refused to	answer
			1	7	
				Skip to #5	6
	p to #56				
	p to #56			_	
	p to #56				

__ __ WOMEN

56. In the past 12 months, have you had sex with a woman who was not a primary partner?

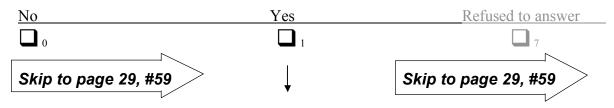


57. Have you had sex with a woman in the past 12 months?



Female Primary Partner (Male Respondent)

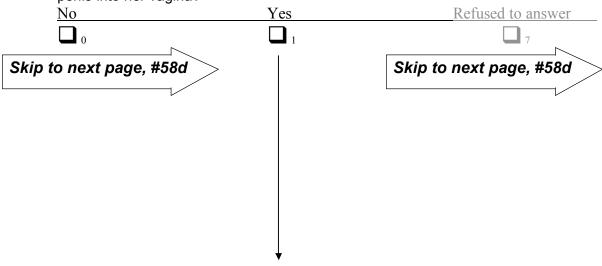
58. Have you been in a primary relationship with a woman in the past 12 months? By primary, I mean a relationship with a woman where you feel committed to her above anyone else AND where you have had sex together.



58.a. How many women have you had primary relationships with in the past 12 months?



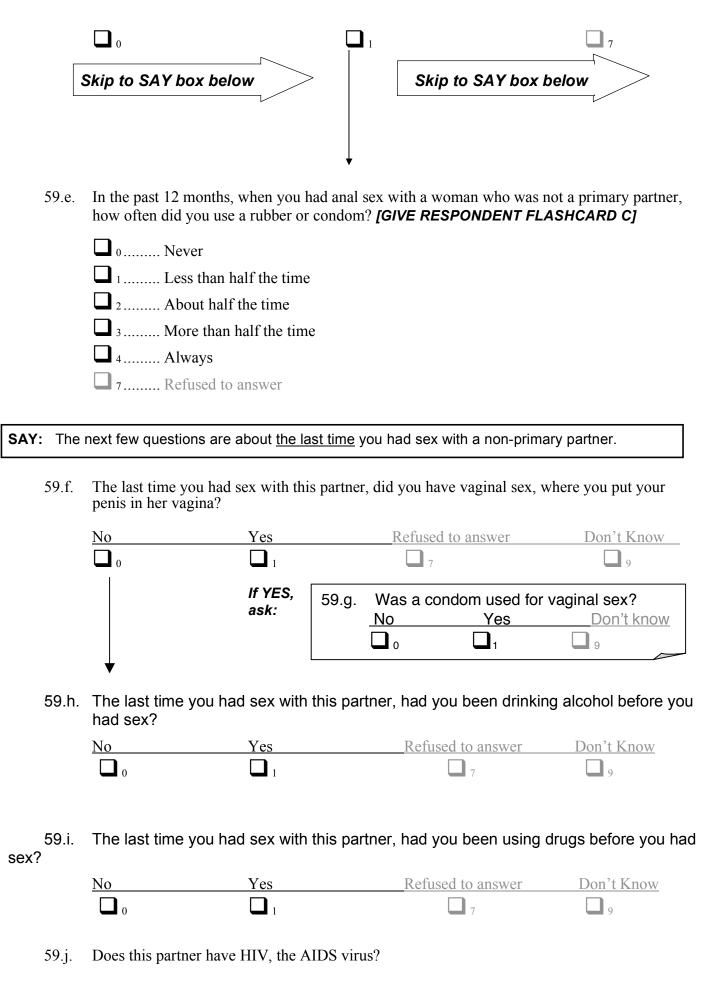
58.b. In the past 12 months, have you had vaginal sex with a primary partner, where you put your penis into her vagina?



58.c. In the past 12 months, when you had vaginal sex with a primary partner, where you put your penis into her vagina, how often did you use a rubber or condom?

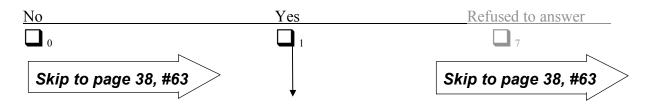
		[GIVE RESPONDENT	FLASHCARD C]						
		□ 0Never								
		lLess than ha	alf the time							
		2 About half t	he time							
		3 More than h	alf the time							
		4Always								
		7Refused to a	nswer							
		- Totasea to a	3115 W C1							
	-0.4									
	58.d.	In the past 12 months, have you had anal sex with a primary partner, where you put your penis into her anus or butt?								
		No	out!	Yes		Refused to	answer			
							7			
		•					/			
	Skip	to SAY box below			Skip to	SAY box	below	•		
				↓ ·						
	58.e.	In the past 12 months, when you had anal sex with a primary partner, how often did you use								
	<i>5</i> 0. c .	a rubber or condom? [GIVE RESPONDENT FLASHCARD C]								
		Never								
		Less than half the tim	e							
		About half the time								
		More than half the tin	ne							
		Always								
		Refused to answer								
		retused to answer								
SAX	V· Now	, I would like you to thi	ink back to the la	ast time voi	u had sex w	vith your (m	ost recent) n	rimary		
parti		, I would like you to till	ink odek to the it	ast time you	u nuu sex w	in your (ii.	iost recent, pr	i iiiiai y		
parti										
	58.f.	The last time you had	sex with this pa	rtner, did y	ou have va	ginal sex, v	where you put	your		
	N	penis in her vagina?								
	No	Yes		Refused to	answer	D0	on't Know			
	U 0	4 1	7			9				
			If YES,							
			ask:	58 σ W	las a condo	m used du	ring vaginal s	ex?		
				No.g. V		m asca aa	Yes	JCX :		
					1	\Box .				
		↓			0	1	9			
	58.h.	The last time you ha	ad sex with this	partner, l	had you be	een drinkin	ig alcohol be	efore		
		you had sex?								
	No	Yes	Refused to ans	swer I	<u>Don't know</u>	, -				

	 0	□ 1	7	9							
had	58.i. sex?	The last time you ha	ad sex with this partner,	had you been using drugs before you							
	$\frac{\text{No}}{\square_0}$	Yes 1	Refused to answer	Don't know 9							
	58.j. Does this partner have HIV, the AIDS virus?										
	$\frac{\text{No}}{\square}_0$	Yes 1	Refused to answer	Don't know 9							
Fem	ale Oth	er Partner (Male resp	ondent)								
59.	In the p	past 12 months, have yo	ou had sex with a woman Yes	who was not a primary partner? Refused to answer							
	0		<u> </u>	7							
	Skip t	o page 31, #60		Skip to page 31, #60							
	59.a. In the past 12 months, how many women did you have sex with who were not primary partner(s)? WOMEN										
	59.b.	where you put your per	nis into her vagina?	with a woman who was not a primary partne	r,						
		No 0	Yes 1	Refused to answer 7							
	Sk	ip to #59.d.		Skip to #59.d.							
	59.c.	-	your penis into her vagina FLASHCARD C the time time f the time	with a woman who was not a primary a, how often did you use a rubber or condom?							
	59.d.	In the past 12 months, have you had anal sex with a woman who was not a primary partner, where you put your penis into her anus or butt?									
		No	Yes	Refused to answer							



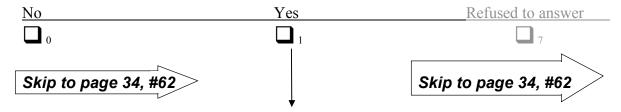
Male Partners (Male respondent)

60. Have you had sex with a man in the past 12 months?



Male Primary Partner (Male respondent)

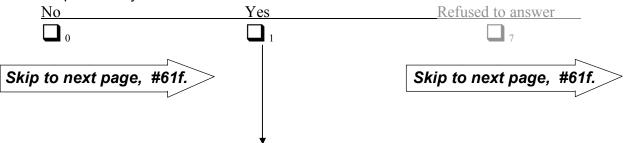
61. Have you been in a primary relationship with a man in the past 12 months? By primary, I mean a relationship with a man where you feel committed to him above anyone else AND where you have had sex together.



61.a. How many men have you had primary relationships with in the past 12 months?



61.b. In the past 12 months, have you had receptive anal sex with a primary partner, where he put his penis into your anus or butt?

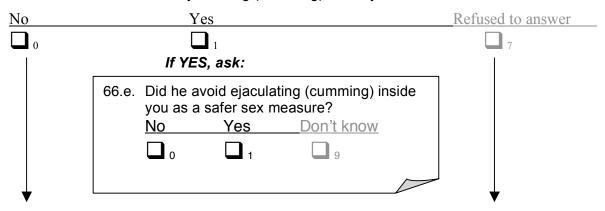


61.c. In the past 12 months, when you had receptive anal sex with a primary partner, where he put his penis into your anus or butt, how often did he use a rubber or condom?

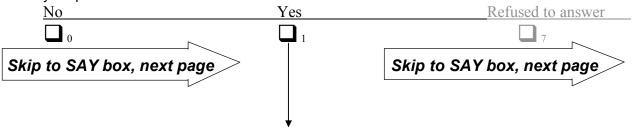
[GIVE RESPONDENT FLASHCARD C]

		☐ 0 Never
		1 Less than half the time
		2 About half the time
\	If answered Always	3 More than half the time
	or Refused,	4 Always
/	► Skip to #61.f.	7 Refused to answer
\ /	If answered Always or Refused, Skip to #61.f.	3 More than half the time 4 Always

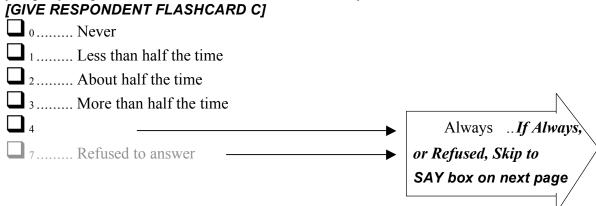
61.d. In the past 12 months have you had receptive anal sex with your primary partner(s) without a condom when he avoided ejaculating (cumming) inside you?



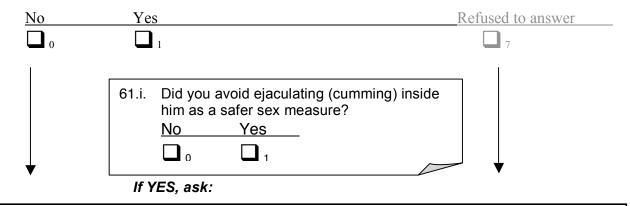
61.f. In the past 12 months, have you had insertive anal sex with a primary partner, where you put your penis into his anus or butt?



61.g. In the past 12 months, when you had insertive anal sex with a primary partner, where you put your penis into his anus or butt, how often did you use a rubber or condom?

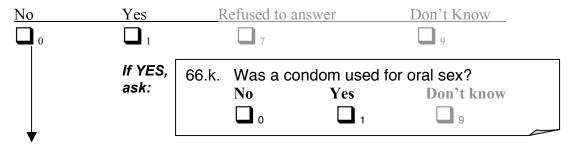


61.h. In the past 12 months, have you had insertive anal sex with your primary partner(s) without a condom when you avoided ejaculating (cumming) inside him?



SAY: The next few questions are about the last time you had sex with your most recent primary partner.

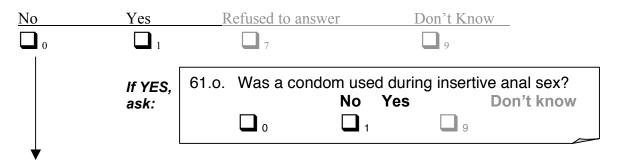
61.j. The last time you had sex with this partner, did you have oral sex?



61.1. The last time you had sex with this partner, did you have receptive anal sex, where he put his penis in your anus or butt?

	If YES, ask:		used during receptive anal sex? Yes Don't know
0	1	7	9
No	Yes	Refused to answer	Don't Know

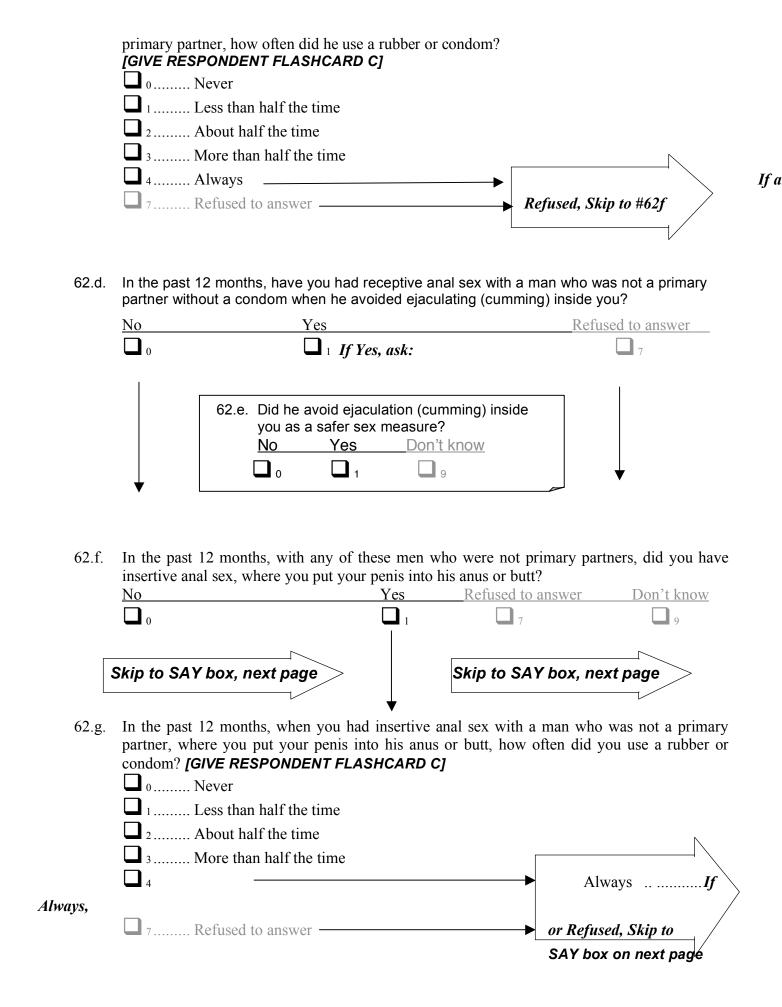
61.n. The last time you had sex with this partner, did you have insertive anal sex, where you put your penis in his anus or butt?



61.p. The last time you had sex with this partner, had you been drinking alcohol before you had sex?

		No C	Yes 1	Refused to answ	ver Don't know
sex?	-	The last time you had	sex w	vith this partner, had you been	using drugs before you had
		No O	Yes 1	Refused to answ	ver Don't know
	61.r.	Does this partner have H No	IV, th $\frac{\text{Yes}}{\square}_1$	e AIDS virus? Refused to ansy	ver Don't know
Male	e Other	Partner (Male responde	ent)		
62.	In the	past 12 months, have you	had s	sex with a man who was not a pri	mary partner(s)?
	No	•	Yes	Refused to answ	ver
	Skip 162.a.	In the past 12 months, he partner(s)?	▼ ow ma	Skip to point on the sex with when the sex with	o were not primary
	62.b.	receptive anal sex, where	-	y of these men who were not prim ut his penis into your anus or butt' Refused to answer	
				Terused to answer	Don't know
	Skip	to next page, #62f		Skip to next page, #62f	Skip to next page, #62f
		✓			

62.c. In the past 12 months, when you had receptive anal sex with a man who was not a



62.h.					nal sex with a man v culating (cumming)	who was not a primary inside him?
	No	Yes			Refused to ans	swer
	0	If YES, as	k:		7	
		him as	a safeı	sex m	ating (cumming) insi easure?	de
		No O		<u>es</u>] 1	Don't know 9	
	*					
	next few questions was not a primary p		st time	you had	d sex with the most	recent sex partner
62.j.	The last time you l	nad sex with this	partne	r, did y	ou have oral sex?	
	No	Yes		Refu	sed to answer	Don't know
		 1			7	9
		II IES,		Was a No	condom used during Yes	g oral sex? Don't
		ask:	<u>know</u>			
62.1.	The last time you lead to be penis in your anus		partne	r, did y	ou have receptive a	nal sex, where he put his
	No	Yes		Refu	sed to answer	Don't know
	0	1			7	9
		II TES,		Was a No	condom used during Yes	g receptive anal sex? Don't know
		ask:		 0	1	9
62.n.	The last time you!	and gay with this	nortno	r did v	ou have incertive or	nal say, whara you nut
02.11.	your penis in his a		partife		sed to answer	al sex, where you put Don't know
				11014	7	9
			62.o. sex?	Was a	condom used dur	ing insertive anal
				No	Yes	Don't know

62.p.	The last time you had sex	_	s partner, had you been drinking	alcohol before
	No	Yes	Refused to answer	Don't know
	0	1	7	9
62.q. had sex?	The last time	e you had sex with thi	s partner, had you been using di	ugs before you
naa sex:	No	Yes	Refused to answer	Don't know
		1	7	9
62.r.	Does this part	ner have HIV, the AID	S virus?	
	No	Yes	Refused to answer	Don't know
	\square 0		7	9

[FOR MEN AND WOMEN]

63. Have you received money or drugs for sex in the past 12 months?

1	No	Yes	Refused to answer	
[7	
3	Skip to #64			
	IF YE	ES, ask:		
	_	ent partners have you	received money or drugs for sex in	n the past 12
	months?			
	par	rtners (999= refused)		
	63b. In the past 12 months, rubber or condom with these		oney or drugs for sex, how often d	lid you use a
	□ 1 Never			
	a Less than half the time			
	☐ 3 About half the time			
	4 More than half the time	2		
	☐ 5 Always			
	99 Don't Know/Refused t	o answer		
64 Ha	Iave you given money or drugs	for sex in the past 12	months?	
	- $\square_{1 \text{ Yes}}$	Tor sex in the past 12	monus.	
	2 No	(skip to # 65)		
	99 Don't know/Refused_			
├→	➤ <i>IF YES</i> , <i>ask</i> : 64a. How many different pa	artners have you given partners (999= r	money or drugs to for sex in the prefused)	past 12 months?
	64b. In the past 12 months, rubber or condom with these		y or drugs for sex , how often did y	you use a
	□ 1 Never			
	2 Less than half the time	;		
	\square 3 About half the time			
	4 More than half the time	e		
	☐ 5 Always			
	99 Don't Know/Refused t	o answer		

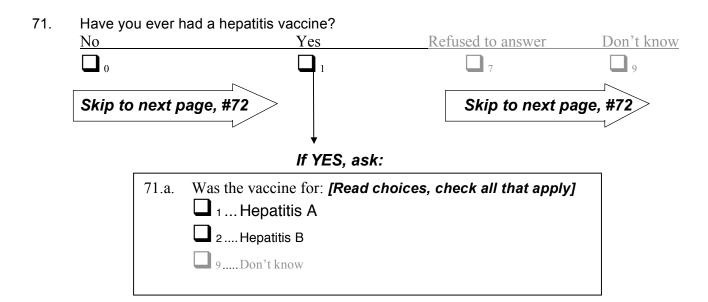
	☐ 1	sbian	_)	
SAY	The next two questions are about	using condon	ns when you first had sex.	
66. 67.	How old were you the first time y YEARS	ou used a consed, 88=neve ou had vagina	dom during vaginal or and r had sex with a condon	n, 99=don't know] se a condom?
68.	Have you ever had a test for sexu disease (STD or VD)?	ally transmitte	d disease, also called vend	ereal
	· /	es	Refused to answer	Don't know
	U 0	 1	7	9
	Skip to next page, #68c		Skip to next page	e, #68c
	68.a. In the past 12 months, did $\frac{\text{No}}{\square}_0$	you have a ter	st for sexually transmitted Refused to answer	diseases? Don't know
	Skip to #68c	-4 1	Skip to #68c	Skip to #68c

68.b. The last time you had a test for sexually transmitted disease, which of the following were you tested for? [Read choices, check one answer for each disease]

No Yes Don't know

		1. Syphili	s		0			9	
		2. Gonorr	hea (clap or	drip)	0	1		9	
								9	
		-				1.		9	
						1 .		9	
								9	
						1		9	
		8. Other (specify)	(')	0	1		9	
			1 2/						
	68.c.	Did you ev	er have sym	ptoms that y	ou though	t might be due	e to a sexu	ally transmitte	d disease,
		-	I not get it cl		Do	fused to answ	or	Don't Imovy	
		No no		T es	<u>Re</u>	1 used to answ	<u>eı</u>		
								9	
								that lasts a mor	
II ca	n make	your skin tu	rn yenow, n	nake you tire	ed, sick to	your stomacn,	or turn yo	our urine dark.	
69. I	3 T	eard of hepatit	tis before I tolo	l you about it?		Vas			
	$\frac{\text{No}}{\Box}_0$					$\underline{\underline{\qquad \qquad Yes}}_1$			
	_ ,								
	Skip	to SAY box	x, top of pa	age 42					
						\			
70.	Has a	doctor or a i	nurse ever t	old you that	vou have	nepatitis?			
	No			Yes	-	efused to ansv	ver	Don't know	
	\square_0					7		9	
			_					_	
	Skip	to next pag	ge, #71	>		Skip to nex	kt page, i	#71 >	
						-			
				\					
		If YES t	o #70, ask:						
		70.a. V	Which type	of henetitic	was it? r	Paad choices	chock	II that apply]	\neg
		/ U.a. V	vnich type ☐ 1 Hepa	•	was it! [I	veau choices	, cneck a	п шасарріу]	
			2 Hepa						
			_ ₂ Hepa						
		1	13 -	-					1

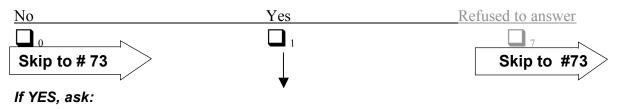
4... Some other type of hepatitis



DRUG USE HISTORY

SAY: The next questions are about alcohol and drug use. Please remember that all of your answers are confidential.

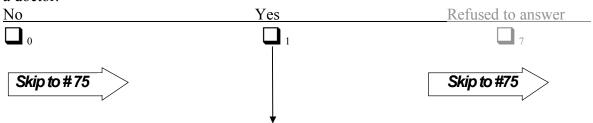
72. In the past month, have you had 5 or more drinks on any single day? By drink, we mean any combination of cans of beer, glasses of wine, or drinks containing liquor of any kind.



72.a. How many times during the past month did you have 5 or more drinks on any single day? times

times

73. Other than alcohol, have you ever used drugs to get high? We mean drugs not prescribed for you by a doctor.



74. Which of the following drugs have you used in the last 12 months? **Do not include drugs you shot up or injected.**

		No	Yes
a.	amphetamine, meth, speed, uppers, crystal, crank, ice	🗖 0	1
b.	crack	🗖 0	1
c.	cocaine (smoked, snorted)	🗖 0	1
	downers (Valium)		
	hallucinogens such as LSD		
f.	club drugs such as ecstasy, GHB, ketamine	🗖 0	1
g.	heroin (smoked, snorted)	🗖 0	1
h.	marijuana	• 0	1
i.	other:	🗖 0	1
	[write in name]		

111 W	re used drugs, vitamins, or scling.	1 0			-	anytime you migloopping or
No		Yes		Refused	to answer	
				7	to answer	
Ski	ip to page 47, #90	·		Skip to	page 47, ‡	#90
		\				
Hov	w old were you when you [Don't knov		YEAR	S		
	e first time you shot up, diver been used before, even		erile needle	e? By steril	e, I mean a	needle that had
No		Yes		Don't kn	OW	
	0	<u> </u>		9		
	ve you shot up or injected	, ,	nins in the p			
No		Yes		Refused	to answer_	
	0	4 1		7	_	
CL			01:		4= 1100	_
SK	ip to page 47, #90		Skip	to page 4	17, #90	
Nex	xt, I'm going to read a list h of these drugs? [GIVE I		In the past	12 months,		did you shoot up
Nex	xt, I'm going to read a list h of these drugs? [GIVE F	RESPONDENT FLA Once	In the past	12 months, DJ 1-3 days	how often	did you shoot up Daily
Nex	xt, I'm going to read a list h of these drugs? [GIVE F	RESPONDENT FLA Once Never a month or less	In the past ASHCARD 2-3 days a month	12 months, DJ 1-3 days a week	how often of 4-6 days a week	Daily
Nex eac.	xt, I'm going to read a list h of these drugs? [GIVE F	Once Never a month or less	In the past ASHCARD 2-3 days a month	12 months, DJ 1-3 days a week	how often of 4-6 days a week	Daily
Nex each	xt, I'm going to read a list h of these drugs? <i>[GIVE F</i>] Heroin and cocaine together (speedballs)	Once Never a month or less	In the past ASHCARD 2-3 days a month	12 months, DJ 1-3 days a week 3	how often of 4-6 days a week	Daily
Nez eac.	A multi described a list of these drugs? [GIVE F	Once Never a month or less 0 1 0 1	In the past ASHCARD 2-3 days a month	12 months, DJ 1-3 days a week 3	4-6 days a week 4 - 4	Daily □ 5 □ 5 □ 5
Nex each	xt, I'm going to read a list h of these drugs? <i>[GIVE F</i>] Heroin and cocaine together (speedballs) Heroin only	Once Never a month or less	In the past ASHCARD 2-3 days a month 2	12 months, DJ 1-3 days a week 3	4-6 days a week 4-6 days a week 4-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-	Daily
a. b. c. d.	Heroin and cocaine together (speedballs) Heroin only	Once Never a month or less	In the past ASHCARD 2-3 days a month 2	12 months, DJ 1-3 days a week 3	4-6 days a week 4-6 days a week 4	Daily □ 5 □ 5 □ 5 □ 5

_	0	7
	Skip to #82	Skip to #82
	•	
	each time that you injected antibiotics, ou inject antibiotics)?	what was the prescribed treatment regimen (i.e.
	he past 12 months, did you get needle ad choices, check No or Yes for	,
a.		or clinic
b.	Bought on the street or from a dealer	
c.		0 1
d.	From other users	
e.	From a Needle Exchange Program	0 1
r		
f.	Did you get a needle from any other If YES, Specify:	
	If NO, ask:	
	e.1. Do you know the location of a	ny needle exchange
	programs in your city? No Yes	
	No Yes	_ /
	IF VEC color	
	If YES, ask:	\mathcal{I}
	•	•

0			Yes 1	Don't know	
If NO,	ask:	If YES, Skip	to next page, #8	IF DON'T KNOW,	ask:
\			·	\	
83.a.				drugs, did you use a needle	e that
	you knew No	or suspected son	neone else had us Yes	sed before? Don't know	
				Don't know	
	— 0		_ '	9	
83.b.				en used before, did you or s	ome
		it before you use		Deville	
	No.		Yes	Don't know	
	O 0		1	9	
If N	lo, Skip to r	next page #84	>	If DK, Skip to next page#	‡84
	<u> </u>		\		
83.c.	What did you	clean it with? [Read	choices, check No	o or Yes for each one]	
	•	-	No Yes	-	
	i. bleach	า	🗖 0 🗖 1	1	
	ii. water.		🗖 0 🗖 1	1	
	iii. boilind	g water	🗖 0 🗖 1	1	
	III. DUIIIII		• 0 • 1		
		I(1 (2	— 0		
	iv. perox		\square . \square .		
	iv. peroxi	ng alcohol			
	iv. peroxiv. rubbir vi. other:	ng alcohol			
	iv. peroxiv. rubbir vi. other:	ng alcohol			

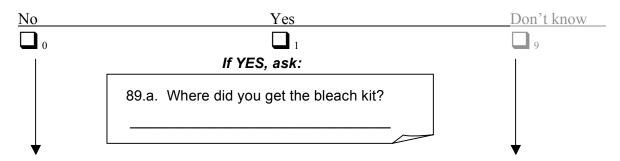
84. The last time you used a needle for injecting drugs, vitamins, or antibiotics, where did you get the needle?

[Interviewer: You do not need to read choices below, but choose the best match. Check Only One]

	1From a pharmacy, grocery, hospital or clinic	4 Other users
	☐ 2Bought on the street or from a dealer	5 A needle exchange
	☐ 3From a friend or sex partner	6From any other place
		Specify:
85.	In the past 12 months, how often did you use a needle that been used by someone else before you? [GIVE RESPON]	· -
	☐ 0 Never If Never, Skip to #88	
	1Less than half the time	
	2About half the time	
	☐ 3More than half the time	
	4Always	
	9Don't know	
86.	In the past 12 months, how often did you use bleach to cleasomeone else before you? <i>[GIVE RESPONDENT FLASHO]</i> 0Never 1Less than half the time 2About half the time 3More than half the time 4Always 9Don't know	
87.	In the past 12 months, how often did you use boiling water to clean a needle that was used by someone else before you FLASHCARD C]	
	□ 0Never	
	1Less than half the time	
	2About half the time	
	☐ 3More than half the time	
	4Always	
	9Don't know	

88.	In the past 12 months, how often did you use any of the same cooker, cotton, rinse water or other equipment with other people while shooting up? [GIVE RESPONDENT
	FLASHCARD C]
	□ 0Never
	1Less than half the time
	2About half the time
	☐ 3More than half the time
	4Always
	9Don't know

89. In the past 12 months, have you gotten a bleach kit to clean your needles?



90. Have you <u>ever</u> been in a drug treatment program, such as out-patient, residential, detox, or methadone treatment?

Yes If YES, ask:	
90.a. Are you currently in a drug treatment program? No Yes 0 1	

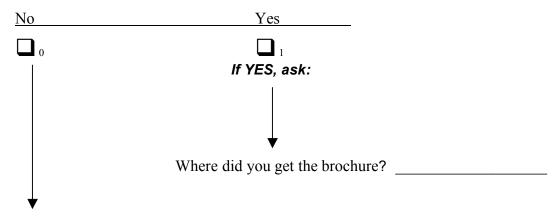
ASSESSMENT OF PREVENTION ACTIVITIES (National Questions)

SAY	: We would li	ke to ask you about HIV prevention activities, like information on how to	
prev	ent the	spread of HIV.	
01	In the next 1	months, have you seen or heard any UIV provention massages in any of the	

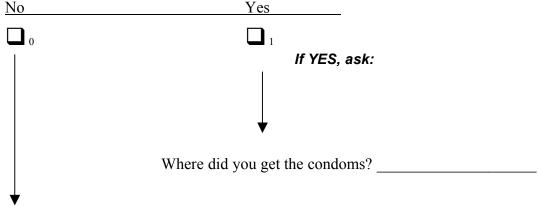
91. In the past 12 months, have you seen or heard any HIV prevention messages in any of the following places?

Hav	e you heard about F	IIV prevention		No	Yes
	a. On the radio?			0	1
	b. On TV?			o	🗖 1
	c. In a newspaper of <i>If YES</i> : What no	r magazine? wspaper or magazine?			
	d. At a health center	r?		🗖 0	🗖 1
	e. At a sex club or	oath house?		o	🗖 1
	g. On a bus or at a	bus stop?		0	🗖 1
					🗖 1
	If YES: Where w	vas the billboard located?		_	
	i. Other location?			0	1
		vas that location?			
92.	of HIV infection?	ns, have you seen any billboom	arus or signs auvernsnig ur	ugs for trea	umem
	No	Yes			
		1			
93.	In the past 12 month	ns, have you called an AIDS	hotline?		
	No Ye	3			
	 0) 1			
	If YES	S, ask:			
		,			
Wha	t organization or pho	ne number did you call?			

94. In the past 12 months, have you received any brochures about protecting yourself from HIV or STDs?



95. In the past 12 months, have you received free condoms?



96. In the past 12 months, have you talked to an outreach worker or promotora about HIV or STDs?

No	Yes
	 1

97. Have you ever participated in a session with a small group of people to come up with a plan to help

protect yourself from HIV or STDs?

No	Yes

Questions for Female Respondents

98. Have you been pregnant in the past five years? (include current pregnancy) □ 0 No (skip to # 103) □ 1 Yes □ 9 Don't know/Refused ➤ (skip to # 103)	
99. While you were pregnant, have you ever received prenatal care in California? O No	
100. During any of your prenatal care visits in California for your most recent pregnancy, did a doctor, nurse or other health care worker talk to you about getting tested for HIV? \[\bigcup_0 \text{ No} \] \[\bigcup_1 \text{ Yes} \] \[\bigcup_9 \text{ Don't know/Refused} \]	
101. At any time during your most recent pregnancy or delivery in California, did you have a te for HIV (blood, or oral swab) for HIV (the virus that causes AIDS)? \[\bigcup_0 \text{No} \] \[\bigcup_1 \text{ Yes} \] \[\bigcup_9 \text{ Don't know/Refused} \]	est
102. What were your reasons for not having an HIV test during your most recent pregnancy? (Read all responses; Check all that apply) □ 0 I was not offered the test □ 1 I did not think I was at risk for HIV □ 2 I agreed to be tested but had difficulty getting the test done □ 3 I was afraid of getting the result □ 4 I had already been tested and did not think I needed to be tested again	
S Other(specify):	

103. Do you think a pregnant woman with HIV can get treatment to help reduce the chances the
she will pass the virus on to her baby?
\square_0 No
□ 1 Yes
9 Don't know/Refused
SAY: Do you have any questions about the issues we've talked about?
[THANK THE RESPONDENT FOR THEIR TIME AND END THE INTERVIEW]
Time ended: : \[\begin{aligned} \text{AM} & \Boxed \text{2-PM} \]

